LEGEND		
TIER		DESCRIPTION
1	Preferred	
2	Non-Preferred	
3	Non-Preferred	
TYPE		DESCRIPTION
QL	Quantity Limit	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
PA	Prior Authorization	You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
ST	Step Therapy	In some cases, you may be required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
AL1	Age Limit	This prescription drug may only be covered if you meet the minimum or maximum age limit.
F	Fertility	Covered under fertility rider
G	Glucometer	Must use manufacturer's voucher
S	Specialty Drug	Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
QLC	Quantity Limit (Custom)	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
ACA	Affordable Care Act	Affordable Care Act
OTC	Over the Counter	Over the Counter Items - covered with a valid prescription

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS		
clonidine hcl er 0.1 mg tab er 12h	1	QL 120 / 30 day(s)
guanfacine hcl er 1 mg tab er 24h	1	QL 30 / 30 day(s)
guanfacine hcl er 2 mg tab er 24h	1	QL 30 / 30 day(s)
guanfacine hcl er 3 mg tab er 24h	1	QL 30 / 30 day(s)
guanfacine hcl er 4 mg tab er 24h	1	QL 30 / 30 day(s)
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR		
atomoxetine hcl 10 mg cap	1	QL 60 / 30 day(s)
atomoxetine hcl 100 mg cap	1	QL 30 / 30 day(s)
atomoxetine hcl 18 mg cap	1	QL 60 / 30 day(s)
atomoxetine hcl 25 mg cap	1	QL 60 / 30 day(s)
atomoxetine hcl 40 mg cap	1	QL 60 / 30 day(s)
atomoxetine hcl 60 mg cap	1	QL 30 / 30 day(s)
atomoxetine hcl 80 mg cap	1	QL 30 / 30 day(s)
AMPHETAMINE MIXTURES		
amphetamine-dextroamphet er 10 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphet er 15 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphet er 20 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphet er 25 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphet er 30 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphet er 5 mg cap er 24h	1	QL 30 / 30 day(s)
amphetamine-dextroamphetamine 10 mg tab	1	QL 60 / 30 day(s)
amphetamine-dextroamphetamine 12.5 mg tab	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amphetamine-dextroamphetamine 15 mg tab	1	QL 60 / 30 day(s)
amphetamine-dextroamphetamine 20 mg tab	1	QL 90 / 30 day(s)
amphetamine-dextroamphetamine 30 mg tab	1	QL 60 / 30 day(s)
amphetamine-dextroamphetamine 5 mg tab	1	QL 60 / 30 day(s)
amphetamine-dextroamphetamine 7.5 mg tab	1	QL 60 / 30 day(s)
AMPHETAMINES		
dextroamphetamine sulfate 10 mg tab	1	QL 180 / 30 day(s)
dextroamphetamine sulfate 5 mg tab	1	QL 90 / 30 day(s)
dextroamphetamine sulfate 5 mg/5ml solution	1	QL 1800 / 30 day(s)
dextroamphetamine sulfate er 10 mg cap er 24h	2	QL 120 / 30 day(s)
dextroamphetamine sulfate er 15 mg cap er 24h	2	QL 120 / 30 day(s)
dextroamphetamine sulfate er 5 mg cap er 24h	2	QL 90 / 30 day(s)
lisdexamfetamine dimesylate 10 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 20 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 30 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 40 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 50 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 60 mg cap	1	QL 30 / 30 day(s)
lisdexamfetamine dimesylate 70 mg cap	1	QL 30 / 30 day(s)
ANALEPTICS		
caffeine citrate 20 mg/ml solution	1	
caffeine citrate 60 mg/3ml solution	1	
ANOREXIANT COMBINATIONS		
QSYMIA 11.25-69 MG CAP ER 24H	1	QL 30 / 30 days PA AL1 At least 12 yrs old
QSYMIA 15-92 MG CAP ER 24H	1	QL 30 / 30 days PA AL1 At least 12 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QSYMIA 3.75-23 MG CAP ER 24H	1	QL 30 / 30 days PA AL1 At least 12 yrs old
QSYMIA 7.5-46 MG CAP ER 24H	1	QL 30 / 30 days PA AL1 At least 12 yrs old
ANOREXIANTS NON-AMPHETAMINE		
phentermine hcl 15 mg cap	1	QL 30 / 30 day(s) PA AL1 At least 17 yrs old
phentermine hcl 30 mg cap	1	QL 30 / 30 day(s) PA AL1 At least 17 yrs old
phentermine hcl 37.5 mg cap	1	QL 30 / 30 day(s) PA AL1 At least 17 yrs old
phentermine hcl 37.5 mg tab	1	QL 30 / 30 days PA AL1 At least 17 yrs old
ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS		
SAXENDA 18 MG/3ML SOLN PEN	1	QL 15 / 30 days PA AL1 At least 12 yrs old
WEGOVY 0.25 MG/0.5ML SOLN A-INJ	1	PA AL1 At least 12 yrs old QLC 4/180 days
WEGOVY 0.5 MG/0.5ML SOLN A-INJ	1	PA AL1 At least 12 yrs old QLC 4/180 days
WEGOVY 1 MG/0.5ML SOLN A-INJ	1	PA AL1 At least 12 yrs old QLC 4/180 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WEGOVY 1.7 MG/0.75ML SOLN A-INJ	1	PA AL1 At least 12 yrs old QLC 6/180 days
WEGOVY 2.4 MG/0.75ML SOLN A-INJ	1	QL 3 / 28 days PA AL1 At least 12 yrs old
ANTI-OBESITY AGENT COMBINATIONS		
CONTRAVE 8-90 MG TAB ER 12H	1	QL 120 / 30 days PA
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150 MG TAB	2	QL 30 / 30 day(s) PA AL1 At least 18 yrs old
SUNOSI 75 MG TAB	2	QL 30 / 30 day(s) PA AL1 At least 18 yrs old
STIMULANTS - MISC.		
armodafinil 150 mg tab	1	QL 30 / 30 day(s)
armodafinil 200 mg tab	1	QL 30 / 30 day(s)
armodafinil 250 mg tab	1	QL 30 / 30 day(s)
armodafinil 50 mg tab	1	QL 30 / 30 day(s)
dexmethylphenidate hcl 10 mg tab	1	QL 60 / 30 day(s)
dexmethylphenidate hcl 2.5 mg tab	1	QL 60 / 30 day(s)
dexmethylphenidate hcl 5 mg tab	1	QL 60 / 30 day(s)
dexmethylphenidate hcl er 10 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 15 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 20 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 25 mg cap er 24h	1	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dexmethylphenidate hcl er 30 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 35 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 40 mg cap er 24h	1	QL 30 / 30 day(s)
dexmethylphenidate hcl er 5 mg cap er 24h	1	QL 30 / 30 day(s)
methylphenidate hcl 10 mg chew tab	2	QL 180 / 30 day(s)
methylphenidate hcl 10 mg tab	1	QL 90 / 30 day(s)
methylphenidate hcl 10 mg/5ml solution	1	QL 900 / 30 day(s)
methylphenidate hcl 2.5 mg chew tab	2	QL 90 / 30 day(s)
methylphenidate hcl 20 mg tab	1	QL 90 / 30 day(s)
methylphenidate hcl 5 mg chew tab	2	QL 90 / 30 day(s)
methylphenidate hcl 5 mg tab	1	QL 90 / 30 day(s)
methylphenidate hcl 5 mg/5ml solution	1	QL 450 / 30 day(s)
methylphenidate hcl er (cd) 10 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (cd) 20 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (cd) 30 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (cd) 40 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (cd) 50 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (cd) 60 mg cap er	1	QL 30 / 30 day(s)
methylphenidate hcl er (la) 20 mg cap er 24h	2	QL 30 / 30 day(s)
methylphenidate hcl er (la) 30 mg cap er 24h	2	QL 30 / 30 day(s)
methylphenidate hcl er (la) 40 mg cap er 24h	2	QL 30 / 30 day(s)
methylphenidate hcl er (osm) 18 mg tab er	1	QL 30 / 30 day(s)
methylphenidate hcl er (osm) 27 mg tab er	1	QL 30 / 30 days
methylphenidate hcl er (osm) 36 mg tab er	1	QL 60 / 30 days
methylphenidate hcl er (osm) 54 mg tab er	1	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylphenidate hcl er 10 mg tab er	1	QL 90 / 30 day(s)
methylphenidate hcl er 18 mg tab er	1	QL 30 / 30 day(s)
METHYLPHENIDATE HCL ER 18 MG TAB ER 24H	1	QL 30 / 30 day(s)
methylphenidate hcl er 20 mg tab er	1	QL 90 / 30 day(s)
methylphenidate hcl er 27 mg tab er	1	QL 30 / 30 day(s)
methylphenidate hcl er 36 mg tab er	1	QL 60 / 30 day(s)
methylphenidate hcl er 54 mg tab er	1	QL 30 / 30 day(s)
modafinil 100 mg tab	1	QL 30 / 30 day(s)
modafinil 200 mg tab	1	QL 30 / 30 day(s)
ALTERNATIVE MEDICINES		
ALTERNATIVE MEDICINE - CO'S		
co q 10 100 mg cap	1	OTC Over the Counter
co q 10 60 mg cap	1	OTC Over the Counter
co q-10 100 mg cap	1	OTC Over the Counter
co q-10 150 mg cap	1	OTC Over the Counter
co q-10 200 mg cap	1	OTC Over the Counter
co q-10 30 mg cap	1	OTC Over the Counter
co q-10 300 mg cap	1	OTC Over the Counter
co q-10 400 mg cap	1	OTC Over the Counter
co q-10 50 mg cap	1	OTC Over the Counter
CO Q-10 75 MG CAP	1	OTC Over the Counter
co q-10 75 mg cap	1	OTC Over the Counter
co q10 100 mg cap	1	OTC Over the Counter
co q10 200 mg cap	1	OTC Over the Counter
co q10 30 mg cap	1	OTC Over the Counter
co q10 maximum strength 200 mg cap	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
co-enzyme q-10 30 mg cap	1	OTC Over the Counter
co-enzyme q10 100 mg cap	1	OTC Over the Counter
co-enzyme q10 200 mg cap	1	OTC Over the Counter
coenzyme q-10 100 mg cap	1	OTC Over the Counter
coenzyme q-10 200 mg cap	1	OTC Over the Counter
coenzyme q-10 30 mg cap	1	OTC Over the Counter
coenzyme q-10 60 mg cap	1	OTC Over the Counter
coenzyme q10 100 mg cap	1	OTC Over the Counter
coenzyme q10 50 mg cap	1	OTC Over the Counter
coq-10 100 mg cap	1	OTC Over the Counter
coq-10 150 mg cap	1	OTC Over the Counter
coq-10 200 mg cap	1	OTC Over the Counter
coq-10 30 mg cap	1	OTC Over the Counter
coq-10 400 mg cap	1	OTC Over the Counter
coq-10 50 mg cap	1	OTC Over the Counter
coq10 100 mg cap	1	OTC Over the Counter
coq10 200 mg cap	1	OTC Over the Counter
coq10 30 mg cap	1	OTC Over the Counter
coq10 400 mg cap	1	OTC Over the Counter
coq10 50 mg cap	1	OTC Over the Counter
coq10 maximum strength 400 mg cap	1	OTC Over the Counter
cvs coenzyme q-10 100 mg cap	1	OTC Over the Counter
cvs coq-10 200 mg cap	1	OTC Over the Counter
cvs coq-10 400 mg cap	1	OTC Over the Counter
cvs coq-10 50 mg cap	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eql coq10 100 mg cap	1	OTC Over the Counter
eql coq10 200 mg cap	1	OTC Over the Counter
eql coq10 400 mg cap	1	OTC Over the Counter
gnp co q-10 100 mg cap	1	OTC Over the Counter
gnp co q10 100 mg cap	1	OTC Over the Counter
gnp co q10 200 mg cap	1	OTC Over the Counter
gnp co q10 60 mg cap	1	OTC Over the Counter
h2q 100 mg cap	1	OTC Over the Counter
hm coq-10 200 mg cap	1	OTC Over the Counter
mega coq10 30 mg cap	1	OTC Over the Counter
mega coq10 400 mg cap	1	OTC Over the Counter
nat-rul coenzyme q-10 60 mg cap	1	OTC Over the Counter
pronutrients coq10 100 mg cap	1	OTC Over the Counter
q-gel forte 30 mg cap	1	OTC Over the Counter
q-gel mega 100 mg cap	1	OTC Over the Counter
q-gel ultra 60 mg cap	1	OTC Over the Counter
q-sorb 150 mg cap	1	OTC Over the Counter
q-sorb 30 mg cap	1	OTC Over the Counter
q-sorb 50 mg cap	1	OTC Over the Counter
q-sorb 75 mg cap	1	OTC Over the Counter
q-sorb co q-10 100 mg cap	1	OTC Over the Counter
q-sorb co q-10 200 mg cap	1	OTC Over the Counter
qc co q-10 100 mg cap	1	OTC Over the Counter
ra coenzyme q-10 100 mg cap	1	OTC Over the Counter
ra coenzyme q-10 200 mg cap	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm co q-10 100 mg cap	1	OTC Over the Counter
sm co q-10 200 mg cap	1	OTC Over the Counter
sm coenzyme q-10 100 mg cap	1	OTC Over the Counter
sm coq-10 50 mg cap	1	OTC Over the Counter
yl coenzyme q10 30 mg cap	1	OTC Over the Counter
ALTERNATIVE MEDICINE - KR'S		
antarctic krill oil 500 mg cap	1	OTC Over the Counter
cvs omega-3 krill oil 500 mg cap	1	OTC Over the Counter
hm megakrill 300 mg cap	1	OTC Over the Counter
hm megakrill 500 mg cap	1	OTC Over the Counter
KRILL OIL 1000 MG CAP	1	OTC Over the Counter
krill oil 300 mg cap	1	OTC Over the Counter
krill oil 350 mg cap	1	OTC Over the Counter
krill oil 500 mg cap	1	OTC Over the Counter
krill oil omega-3 500 mg cap	1	OTC Over the Counter
KRILL OIL/ASTAXANTHIN 1000 MG CAP	1	OTC Over the Counter
maximum red krill 300 mg cap	1	OTC Over the Counter
megared omega-3 krill oil 500 mg cap	1	OTC Over the Counter
omega-3 500 mg cap	1	OTC Over the Counter
OMEGA-3 KRILL OIL 1000 MG CAP	1	OTC Over the Counter
omega-3 krill oil 300 mg cap	1	OTC Over the Counter
omega-3 krill oil 500 mg cap	1	OTC Over the Counter
sm megakrill 300 mg cap	1	OTC Over the Counter
superior krill oil 500 mg cap	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALTERNATIVE MEDICINE - ME'S		
cvs melatonin 10 mg tab	1	OTC Over the Counter
cvs melatonin 3 mg tab	1	OTC Over the Counter
cvs melatonin 5 mg tab	1	OTC Over the Counter
gnp melatonin 3 mg tab	1	OTC Over the Counter
gnp melatonin maximum strength 5 mg tab	1	OTC Over the Counter
hm melatonin 5 mg tab	1	OTC Over the Counter
kp melatonin 3 mg tab	1	OTC Over the Counter
melatonin 1 mg tab	1	OTC Over the Counter
melatonin 10 mg tab	1	OTC Over the Counter
melatonin 3 mg tab	1	OTC Over the Counter
melatonin 5 mg tab	1	OTC Over the Counter
melatonin extra strength 10 mg tab	1	OTC Over the Counter
melatonin maximum strength 10 mg tab	1	OTC Over the Counter
melatonin maximum strength 5 mg tab	1	OTC Over the Counter
qc melatonin max st 5 mg tab	1	OTC Over the Counter
ra melatonin 10 mg tab	1	OTC Over the Counter
ra melatonin 3 mg tab	1	OTC Over the Counter
ra melatonin 5 mg tab	1	OTC Over the Counter
sm melatonin 3 mg tab	1	OTC Over the Counter
sm melatonin 5 mg tab	1	OTC Over the Counter
sv melatonin 5 mg tab	1	OTC Over the Counter
AMINOGLYCOSIDES		
neomycin sulfate 500 mg tab	1	
paromomycin sulfate 250 mg cap	2	
tobramycin 300 mg/4ml nebu soln	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tobramycin 300 mg/5ml nebu soln	3	S Specialty Drug
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ADALIMUMAB-ADBM (2 PEN) 40 MG/0.8ML AUT-IJ KIT	1	QL 2 / 28 days PA S Specialty Drug
ADALIMUMAB-ADBM (2 SYRINGE) 10 MG/0.2ML PREF SY KT	1	QL 2 / 28 days PA S Specialty Drug
ADALIMUMAB-ADBM (2 SYRINGE) 20 MG/0.4ML PREF SY KT	1	QL 2 / 28 days PA S Specialty Drug
ADALIMUMAB-ADBM (2 SYRINGE) 40 MG/0.8ML PREF SY KT	1	QL 2 / 28 days PA S Specialty Drug
ADALIMUMAB-ADBM(CD/UC/HS STRT) 40 MG/0.8ML AUT-IJ KIT	1	PA S Specialty Drug QLC 6 / 180 days
ADALIMUMAB-ADBM(PS/UV STARTER) 40 MG/0.8ML AUT-IJ KIT	1	PA S Specialty Drug QLC 4 / 180 days
ADALIMUMAB-FKJP 20 MG/0.4ML PREF SY KT	1	QL 0.8 / 28 day(s) PA S Specialty Drug
ADALIMUMAB-FKJP 40 MG/0.8ML AUT-IJ KIT	1	QL 1.6 / 28 day(s) PA S Specialty Drug
ADALIMUMAB-FKJP 40 MG/0.8ML PREF SY KT	1	QL 1.6 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMPONI 100 MG/ML SOLN A-INJ	3	QL 1 / 28 day(s) PA S Specialty Drug
SIMPONI 100 MG/ML SOLN PRSYR	3	QL 1 / 28 day(s) PA S Specialty Drug
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
XELJANZ 1 MG/ML SOLUTION	3	QL 240 / 30 day(s) PA S Specialty Drug
XELJANZ 10 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
XELJANZ 5 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
XELJANZ XR 11 MG TAB ER 24H	3	QL 30 / 30 day(s) PA S Specialty Drug
XELJANZ XR 22 MG TAB ER 24H	3	QL 30 / 30 day(s) PA S Specialty Drug
CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
celecoxib 100 mg cap	1	QL 90 / 30 day(s)
celecoxib 200 mg cap	1	QL 60 / 30 day(s)
celecoxib 400 mg cap	1	QL 30 / 30 day(s)
celecoxib 50 mg cap	1	QL 60 / 30 day(s)
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162 MG/0.9ML SOLN PRSYR	2	QL 3.6 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACTEMRA ACTPEN 162 MG/0.9ML SOLN A-INJ	2	QL 4 / 28 day(s) PA S Specialty Drug
NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS		
diclofenac-misoprostol 50-0.2 mg tab dr	2	
diclofenac-misoprostol 75-0.2 mg tab dr	2	
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
advil junior strength 100 mg chew tab	1	OTC Over the Counter
advil junior strength 100 mg tab	1	OTC Over the Counter
ALEVE 220 MG TAB	1	OTC Over the Counter
all day pain relief 220 mg tab	1	OTC Over the Counter
all day relief 220 mg tab	1	OTC Over the Counter
cataflam 50 mg tab	1	
childrens ibuprofen 100 100 mg/5ml suspension	1	OTC Over the Counter
childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
childrens medi-profen 100 mg/5ml suspension	1	OTC Over the Counter
cvs all day pain relief 220 mg tab	1	OTC Over the Counter
cvs childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
cvs ibuprofen 200 mg tab	1	OTC Over the Counter
cvs ibuprofen childrens 100 mg chew tab	1	OTC Over the Counter
cvs ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
cvs ibuprofen junior strength 100 mg chew tab	1	OTC Over the Counter
cvs naproxen sodium 220 mg tab	1	OTC Over the Counter
diclofenac potassium 50 mg tab	1	
diclofenac sodium 25 mg tab dr	1	
diclofenac sodium 50 mg tab dr	1	
diclofenac sodium 75 mg tab dr	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dyspel 200 mg tab	1	OTC Over the Counter
eq all day pain relief 220 mg tab	1	OTC Over the Counter
eq ibuprofen 200 mg tab	1	OTC Over the Counter
eq ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
eq ibuprofen junior 100 mg chew tab	1	OTC Over the Counter
eq naproxen sodium 220 mg tab	1	OTC Over the Counter
eql childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
eql ibuprofen 200 mg tab	1	OTC Over the Counter
eql naproxen sodium 220 mg tab	1	OTC Over the Counter
etodolac 200 mg cap	1	
etodolac 300 mg cap	1	
etodolac 400 mg tab	1	
etodolac 500 mg tab	1	
etodolac er 400 mg tab er 24h	1	
etodolac er 500 mg tab er 24h	1	
etodolac er 600 mg tab er 24h	1	
flurbiprofen 100 mg tab	1	
ft all day pain relief 220 mg tab	1	OTC Over the Counter
ft ibuprofen 200 mg tab	1	OTC Over the Counter
ft ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
ft ibuprofen ib childrens 100 mg chew tab	1	OTC Over the Counter
gnp childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
gnp ibuprofen 200 mg tab	1	OTC Over the Counter
gnp ibuprofen childrens 100 mg chew tab	1	OTC Over the Counter
gnp naproxen sodium 220 mg tab	1	OTC Over the Counter
goodsense ibuprofen 200 mg tab	1	OTC Over the Counter
goodsense ibuprofen childrens 100 mg chew tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
goodsense ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
goodsense naproxen sodium 220 mg tab	1	OTC Over the Counter
hm ibuprofen 100 mg chew tab	1	OTC Over the Counter
hm ibuprofen 200 mg tab	1	OTC Over the Counter
hm ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
hm ibuprofen ib 100 mg chew tab	1	OTC Over the Counter
hm ibuprofen ib 200 mg tab	1	OTC Over the Counter
hm naproxen sodium 220 mg tab	1	OTC Over the Counter
hy-vee all day relief 220 mg tab	1	OTC Over the Counter
hyvee ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
ibu 400 mg tab	1	
ibu 600 mg tab	1	
ibu 800 mg tab	1	
ibu-200 200 mg tab	1	OTC Over the Counter
ibuprofen 100 junior strength 100 mg chew tab	1	OTC Over the Counter
ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
ibuprofen 200 mg tab	1	OTC Over the Counter
ibuprofen 400 mg tab	1	
ibuprofen 600 mg tab	1	
ibuprofen 800 mg tab	1	
ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
ibuprofen junior strength 100 mg chew tab	1	OTC Over the Counter
indomethacin 25 mg cap	1	
indomethacin 50 mg cap	1	
indomethacin er 75 mg cap er	2	
kls ibuprofen 200 mg tab	1	OTC Over the Counter
kls ibuprofen ib 200 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
kls naproxen sodium 220 mg tab	1	OTC Over the Counter
medi-first ibuprofen 200 mg tab	1	OTC Over the Counter
medi-profen 200 mg tab	1	OTC Over the Counter
mediproxen 220 mg tab	1	OTC Over the Counter
meijer ibuprofen 200 mg tab	1	OTC Over the Counter
meloxicam 15 mg tab	1	QL 30 / 30 day(s)
meloxicam 7.5 mg tab	1	QL 30 / 30 day(s)
mm ibuprofen 200 mg tab	1	OTC Over the Counter
motrin ib 200 mg tab	1	OTC Over the Counter
nabumetone 500 mg tab	1	
nabumetone 750 mg tab	1	
naproxen 250 mg tab	1	
naproxen 375 mg tab	1	
naproxen 500 mg tab	1	
naproxen sodium 220 mg tab	1	OTC Over the Counter
oxaprozin 600 mg tab	2	
pamprin all day relief max st 220 mg tab	1	OTC Over the Counter
piroxicam 10 mg cap	1	AL1 Up to 75 yrs old
piroxicam 20 mg cap	1	
provil 200 mg tab	1	OTC Over the Counter
px all day relief 220 mg tab	1	OTC Over the Counter
px childrens profen ib 100 mg/5ml suspension	1	OTC Over the Counter
px ibuprofen 200 mg tab	1	OTC Over the Counter
px ibuprofen junior strength 100 mg chew tab	1	OTC Over the Counter
qc childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
qc ibuprofen 200 mg tab	1	OTC Over the Counter
qc ibuprofen ib 200 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
qc naproxen sodium 220 mg tab	1	OTC Over the Counter
ra ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
ra ibuprofen 200 mg tab	1	OTC Over the Counter
ra ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
ra ibuprofen junior strength 100 mg chew tab	1	OTC Over the Counter
ra naproxen sodium 220 mg tab	1	OTC Over the Counter
ra pain relief ibuprofen 200 mg tab	1	OTC Over the Counter
relafen 500 mg tab	1	
relafen 750 mg tab	1	
sb ibuprofen 200 mg tab	1	OTC Over the Counter
sb naproxen sodium 220 mg tab	1	OTC Over the Counter
sm childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
sm ibuprofen 200 mg tab	1	OTC Over the Counter
sm ibuprofen ib 100 mg chew tab	1	OTC Over the Counter
sm ibuprofen ib 200 mg tab	1	OTC Over the Counter
sm ibuprofen ib childrens 100 mg chew tab	1	OTC Over the Counter
sm ibuprofen jr 100 mg tab	1	OTC Over the Counter
sm naproxen sodium 220 mg tab	1	OTC Over the Counter
sulindac 150 mg tab	1	
sulindac 200 mg tab	1	
tgt childrens ibuprofen 100 mg/5ml suspension	1	OTC Over the Counter
tgt ibuprofen 200 mg tab	1	OTC Over the Counter
tgt ibuprofen childrens 100 mg/5ml suspension	1	OTC Over the Counter
tgt ibuprofen junior strength 100 mg chew tab	1	OTC Over the Counter
tgt naproxen sodium 220 mg tab	1	OTC Over the Counter
wal-profen 200 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 10 & 20 & 30 MG TAB THPK	3	PA S Specialty Drug QLC 55 / 180 day(s)
OTEZLA 30 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
PYRIMIDINE SYNTHESIS INHIBITORS		
leflunomide 10 mg tab	1	
leflunomide 20 mg tab	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125 MG/ML SOLN PRSYR	3	QL 4 / 28 day(s) PA S Specialty Drug
ORENCIA 50 MG/0.4ML SOLN PRSYR	3	QL 1.6 / 28 day(s) PA S Specialty Drug
ORENCIA 87.5 MG/0.7ML SOLN PRSYR	3	QL 2.8 / 28 day(s) PA S Specialty Drug
ORENCIA CLICKJECT 125 MG/ML SOLN A-INJ	3	QL 4 / 28 day(s) PA S Specialty Drug
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25 MG RECON SOLN	3	QL 8 / 28 day(s) PA S Specialty Drug
ENBREL 25 MG/0.5ML SOLN PRSYR	3	QL 2.04 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENBREL 25 MG/0.5ML SOLUTION	3	QL 4 / 28 day(s) PA S Specialty Drug
ENBREL 50 MG/ML SOLN PRSYR	3	QL 4 / 28 day(s) PA S Specialty Drug
ENBREL MINI 50 MG/ML SOLN CART	3	QL 4 / 28 day(s) PA S Specialty Drug
ENBREL SURECLICK 50 MG/ML SOLN A-INJ	3	QL 4 / 28 day(s) PA S Specialty Drug
ANALGESICS - NONNARCOTIC		
ANALGESICS OTHER		
8 hour arthritis pain 650 mg tab er	1	OTC Over the Counter
8 hour arthritis pain reliever 650 mg tab er	1	OTC Over the Counter
8 hour pain reliever 650 mg tab er	1	OTC Over the Counter
8 hr arthritis pain relief 650 mg tab er	1	OTC Over the Counter
8hr muscle aches & pain 650 mg tab er	1	OTC Over the Counter
acetaminophen 160 mg/5ml suspension	1	OTC Over the Counter
acetaminophen 325 mg tab	1	OTC Over the Counter
acetaminophen 500 mg tab	1	OTC Over the Counter
acetaminophen 650 mg/20.3ml suspension	1	OTC Over the Counter
acetaminophen 8 hour 650 mg tab er	1	OTC Over the Counter
acetaminophen childrens 160 mg/5ml suspension	1	OTC Over the Counter
acetaminophen er 650 mg tab er	1	OTC Over the Counter
acetaminophen extra strength 500 mg tab	1	OTC Over the Counter
acetaminophen infants 160 mg/5ml suspension	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
acetaminophen junior strength 160 mg tab disp	1	OTC Over the Counter
acetaminophen rapid tabs child 80 mg tab disp	1	OTC Over the Counter
aphen 325 mg tab	1	OTC Over the Counter
arthritis pain relief 650 mg tab er	1	OTC Over the Counter
arthritis pain reliever 650 mg tab er	1	OTC Over the Counter
aurophen childrens 160 mg/5ml suspension	1	OTC Over the Counter
betatemp childrens 160 mg/5ml suspension	1	OTC Over the Counter
childrens acetaminophen 160 mg/5ml suspension	1	OTC Over the Counter
childrens acetaminophen 80 mg tab disp	1	OTC Over the Counter
childrens non-aspirin 160 mg/5ml suspension	1	OTC Over the Counter
cvs 8hr arthritis pain relief 650 mg tab er	1	OTC Over the Counter
cvs 8hr muscle aches & pain 650 mg tab er	1	OTC Over the Counter
cvs acetaminophen 325 mg tab	1	OTC Over the Counter
cvs acetaminophen ex st 500 mg tab	1	OTC Over the Counter
cvs arthritis pain relief 650 mg tab er	1	OTC Over the Counter
cvs infants pain relief drops 160 mg/5ml suspension	1	OTC Over the Counter
cvs non-aspirin extra strength 500 mg tab	1	OTC Over the Counter
cvs pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
cvs pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
cvs pain relief 500 mg tab	1	OTC Over the Counter
cvs pain relief 650 mg tab er	1	OTC Over the Counter
cvs pain relief extra strength 500 mg tab	1	OTC Over the Counter
cvs pain relief regular st 325 mg tab	1	OTC Over the Counter
eq 8hr arthritis pain relief 650 mg tab er	1	OTC Over the Counter
eq acetaminophen 325 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq acetaminophen 500 mg tab	1	OTC Over the Counter
eq arthritis pain 650 mg tab er	1	OTC Over the Counter
eq pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
eq pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
eq pain reliever 325 mg tab	1	OTC Over the Counter
eq pain reliever 500 mg tab	1	OTC Over the Counter
eq pain reliever ex st 500 mg tab	1	OTC Over the Counter
eql acetaminophen 160 mg tab disp	1	OTC Over the Counter
eql acetaminophen 325 mg tab	1	OTC Over the Counter
eql acetaminophen childrens 160 mg/5ml suspension	1	OTC Over the Counter
eql acetaminophen ex st 500 mg tab	1	OTC Over the Counter
eql acetaminophen infants 160 mg/5ml suspension	1	OTC Over the Counter
eql arthritis pain relief 650 mg tab er	1	OTC Over the Counter
ft 8 hour pain relief 650 mg tab er	1	OTC Over the Counter
ft arthritis pain reliever 650 mg tab er	1	OTC Over the Counter
ft pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
ft pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
ft pain relief 325 mg tab	1	OTC Over the Counter
ft pain relief adult extra st 500 mg tab	1	OTC Over the Counter
ft pain relief extra strength 500 mg tab	1	OTC Over the Counter
ft pain reliever ex str adult 500 mg tab	1	OTC Over the Counter
ft pain reliver extra st adult 500 mg tab	1	OTC Over the Counter
gnp 8 hour arthritis relief 650 mg tab er	1	OTC Over the Counter
gnp 8 hour pain relief 650 mg tab er	1	OTC Over the Counter
gnp 8 hour pain reliever 650 mg tab er	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gnp acetaminophen 325 mg tab	1	OTC Over the Counter
gnp acetaminophen ex st 500 mg tab	1	OTC Over the Counter
gnp arthritis pain relief 650 mg tab er	1	OTC Over the Counter
gnp children's pain & fever 160 mg/5ml suspension	1	OTC Over the Counter
gnp infants pain/fever 160 mg/5ml suspension	1	OTC Over the Counter
gnp pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
gnp pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
gnp pain relief 325 mg tab	1	OTC Over the Counter
gnp pain relief extra strength 500 mg tab	1	OTC Over the Counter
goodsense arthritis pain 650 mg tab er	1	OTC Over the Counter
goodsense pain & fever child 160 mg/5ml suspension	1	OTC Over the Counter
goodsense pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
goodsense pain relief 325 mg tab	1	OTC Over the Counter
goodsense pain relief extra st 500 mg tab	1	OTC Over the Counter
healthy mama shake that ache 500 mg tab	1	OTC Over the Counter
hm arthritis pain relief 650 mg tab er	1	OTC Over the Counter
hm pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
hm pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
hm pain relief 650 mg tab er	1	OTC Over the Counter
hm pain relief extra strength 500 mg tab	1	OTC Over the Counter
hm pain relieve child dye-free 160 mg/5ml suspension	1	OTC Over the Counter
hm pain reliever 325 mg tab	1	OTC Over the Counter
hm pain reliever childrens 160 mg/5ml suspension	1	OTC Over the Counter
hm pain reliever infants 160 mg/5ml suspension	1	OTC Over the Counter
infants pain & fever 160 mg/5ml suspension	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
kls acetaminophen ex st 500 mg tab	1	OTC Over the Counter
kls rapid release pain 500 mg tab	1	OTC Over the Counter
mapap 325 mg tab	1	OTC Over the Counter
mapap 500 mg tab	1	OTC Over the Counter
mapap arthritis pain 650 mg tab er	1	OTC Over the Counter
max relief jr child pain/fever 160 mg/5ml suspension	1	OTC Over the Counter
medi-tabs extra strength 500 mg tab	1	OTC Over the Counter
meijer aspirin free 325 mg tab	1	OTC Over the Counter
meijer aspirin free 500 mg tab	1	OTC Over the Counter
midol 650 mg tab er	1	OTC Over the Counter
mm acetaminophen ex str 500 mg tab	1	OTC Over the Counter
mm arthritis pain 650 mg tab er	1	OTC Over the Counter
non-aspirin 325 mg tab	1	OTC Over the Counter
non-aspirin 500 mg tab	1	OTC Over the Counter
non-aspirin childrens 160 mg/5ml suspension	1	OTC Over the Counter
non-aspirin extra strength 500 mg tab	1	OTC Over the Counter
non-aspirin pain relief 325 mg tab	1	OTC Over the Counter
non-aspirin pain reliever 325 mg tab	1	OTC Over the Counter
nortemp 160 mg/5ml suspension	1	OTC Over the Counter
pain & fever 325 mg tab	1	OTC Over the Counter
pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter
pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
pain & fever kids 160 mg/5ml suspension	1	OTC Over the Counter
pain relief childrens 160 mg/5ml suspension	1	OTC Over the Counter
pain relief extra strength 500 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pain relief regular strength 325 mg tab	1	OTC Over the Counter
pain reliever 325 mg tab	1	OTC Over the Counter
pain reliever 500 mg tab	1	OTC Over the Counter
pain reliever extra strength 500 mg tab	1	OTC Over the Counter
pain reliever for adults 500 mg tab	1	OTC Over the Counter
panadol childrens 160 mg/5ml suspension	1	OTC Over the Counter
panadol extra strength 500 mg tab	1	OTC Over the Counter
panadol infants 160 mg/5ml suspension	1	OTC Over the Counter
pediacare children 160 mg/5ml suspension	1	OTC Over the Counter
pediacare infant fever/pain 160 mg/5ml suspension	1	OTC Over the Counter
pediacare infants 160 mg/5ml suspension	1	OTC Over the Counter
pharbetol 325 mg tab	1	OTC Over the Counter
pharbetol extra strength 500 mg tab	1	OTC Over the Counter
px arthritis pain relief 650 mg tab er	1	OTC Over the Counter
px childrens pain relief 160 mg/5ml suspension	1	OTC Over the Counter
px pain relief extra strength 500 mg tab	1	OTC Over the Counter
qc 8 hour pain relief 650 mg tab er	1	OTC Over the Counter
qc acetaminophen 8 hours 650 mg tab er	1	OTC Over the Counter
qc acetaminophen 8hr arth pain 650 mg tab er	1	OTC Over the Counter
qc acetaminophen 8hr musc ache 650 mg tab er	1	OTC Over the Counter
qc acetaminophen infants 160 mg/5ml suspension	1	OTC Over the Counter
qc arthritis pain relief 650 mg tab er	1	OTC Over the Counter
qc non-aspirin 8 hour 650 mg tab er	1	OTC Over the Counter
qc non-aspirin childrens 160 mg/5ml suspension	1	OTC Over the Counter
qc non-aspirin extra strength 500 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
qc non-aspirin jr strength 160 mg tab disp	1	OTC Over the Counter
qc pain relief 325 mg tab	1	OTC Over the Counter
qc pain relief childrens 160 mg/5ml suspension	1	OTC Over the Counter
qc pain relief extra strength 500 mg tab	1	OTC Over the Counter
qc pain relief infants 160 mg/5ml suspension	1	OTC Over the Counter
ra 8 hour pain relief 650 mg tab er	1	OTC Over the Counter
ra acetaminophen 325 mg tab	1	OTC Over the Counter
ra acetaminophen ex st 500 mg tab	1	OTC Over the Counter
ra arthritis pain relief 650 mg tab er	1	OTC Over the Counter
ra childrens fever/pain 160 mg/5ml suspension	1	OTC Over the Counter
ra childrens non-aspirin 160 mg/5ml suspension	1	OTC Over the Counter
ra fever reducer/pain reliever 160 mg/5ml suspension	1	OTC Over the Counter
ra pain relief acetaminophen 325 mg tab	1	OTC Over the Counter
ra pain relief acetaminophen 500 mg tab	1	OTC Over the Counter
sb arthritis pain relief 650 mg tab er	1	OTC Over the Counter
sb childrens non-aspirin 80 mg tab disp	1	OTC Over the Counter
sb non-aspirin 325 mg tab	1	OTC Over the Counter
sb non-aspirin extra strength 500 mg tab	1	OTC Over the Counter
sb non-aspirin jr strength 160 mg tab disp	1	OTC Over the Counter
sb pain reliever childrens 160 mg/5ml suspension	1	OTC Over the Counter
sb pain reliever ex st 500 mg tab	1	OTC Over the Counter
sm 8 hour pain relief 650 mg tab er	1	OTC Over the Counter
sm arthritis pain relief 650 mg tab er	1	OTC Over the Counter
sm arthritis pain reliever 650 mg tab er	1	OTC Over the Counter
sm pain & fever childrens 160 mg/5ml suspension	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm pain & fever infants 160 mg/5ml suspension	1	OTC Over the Counter
sm pain relief 500 mg tab	1	OTC Over the Counter
sm pain relief extra strength 500 mg tab	1	OTC Over the Counter
sm pain reliever 325 mg tab	1	OTC Over the Counter
sm pain reliever childrens 160 mg/5ml suspension	1	OTC Over the Counter
sm pain reliever ex st 500 mg tab	1	OTC Over the Counter
sm pain reliever ex st 650 mg tab er	1	OTC Over the Counter
sm rapid melts junior 160 mg tab disp	1	OTC Over the Counter
tactinal 325 mg tab	1	OTC Over the Counter
tactinal extra strength 500 mg tab	1	OTC Over the Counter
tgt acetaminophen childrens 160 mg/5ml suspension	1	OTC Over the Counter
tgt acetaminophen ex st 500 mg tab	1	OTC Over the Counter
tgt arthritis pain relief 650 mg tab er	1	OTC Over the Counter
tgt childrens acetaminophen 160 mg/5ml suspension	1	OTC Over the Counter
ANALGESICS-SEDATIVES		
ALLZITAL 25-325 MG TAB	1	QL 180 / 30 day(s)
bac 50-325-40 mg tab	1	QL 180 / 30 day(s)
BUTALBITAL-ACETAMINOPHEN 25-325 MG TAB	1	QL 180 / 30 day(s)
butalbital-apap-caffeine 50-325-40 mg tab	1	QL 180 / 30 day(s)
butalbital-aspirin-caffeine 50-325-40 mg cap	1	QL 180 / 30 day(s)
SALICYLATES		
adult aspirin regimen 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspir-low 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin 325 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin 325 mg tab dr	1	OTC Over the Counter
aspirin 81 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
aspirin 81 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin adult low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin childrens 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin ec low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
aspirin regimen 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
bayer advanced aspirin reg st 325 mg tab	1	OTC Over the Counter
bayer aspirin 325 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bayer aspirin 325 mg tab dr	1	OTC Over the Counter
bayer aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
bayer low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
bayer low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
childrens aspirin low strength 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
cvs aspirin 325 mg tab	1	OTC Over the Counter
cvs aspirin adult low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
cvs aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
cvs aspirin ec 325 mg tab dr	1	OTC Over the Counter
cvs aspirin ec 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
cvs aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
cvs aspirin low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
cvs genuine aspirin 325 mg tab	1	OTC Over the Counter
diflunisal 500 mg tab	1	
ecotrin low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
ecpirin 325 mg tab dr	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq aspirin 325 mg tab	1	OTC Over the Counter
eq aspirin adult low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
eq aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
eql aspirin 325 mg tab	1	OTC Over the Counter
eql aspirin ec 325 mg tab dr	1	OTC Over the Counter
eql aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
eql aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
ft aspirin 325 mg tab	1	OTC Over the Counter
ft aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
ft enteric coated aspirin 325 mg tab dr	1	OTC Over the Counter
genuine aspirin 325 mg tab	1	OTC Over the Counter
gnp adult aspirin low strength 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
gnp aspirin 325 mg tab	1	OTC Over the Counter
gnp aspirin 325 mg tab dr	1	OTC Over the Counter
gnp aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
gnp aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
goodsense aspirin 325 mg tab	1	OTC Over the Counter
goodsense aspirin 325 mg tab dr	1	OTC Over the Counter
goodsense aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
goodsense aspirin adult low st 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
goodsense aspirin adults 325 mg tab	1	OTC Over the Counter
goodsense aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
h-e-b aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
hm adult aspirin 325 mg tab	1	OTC Over the Counter
hm aspirin 325 mg tab	1	OTC Over the Counter
hm aspirin 325 mg tab dr	1	OTC Over the Counter
hm aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
hm aspirin ec 325 mg tab dr	1	OTC Over the Counter
hm aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
kls aspirin ec 325 mg tab dr	1	OTC Over the Counter
kls aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
kp aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
medi-first aspirin 325 mg tab	1	OTC Over the Counter
medique aspirin 325 mg tab	1	OTC Over the Counter
meijer aspirin ec 325 mg tab dr	1	OTC Over the Counter
miniprin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
mm aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
norwich aspirin 325 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
px aspirin 325 mg tab	1	OTC Over the Counter
px aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
px enteric aspirin 325 mg tab dr	1	OTC Over the Counter
px enteric aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
qc aspirin 325 mg tab	1	OTC Over the Counter
qc aspirin 325 mg tab dr	1	OTC Over the Counter
qc aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
qc aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
qc childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
qc enteric aspirin 325 mg tab dr	1	OTC Over the Counter
ra aspirin 325 mg tab	1	OTC Over the Counter
ra aspirin adult low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
ra aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
ra aspirin childrens 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
ra aspirin ec 325 mg tab dr	1	OTC Over the Counter
ra aspirin ec 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
ra aspirin ec adult low st 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
ra pain relief aspirin 325 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sb aspirin 325 mg tab	1	OTC Over the Counter
sb aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sb aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sb aspirin ec 325 mg tab dr	1	OTC Over the Counter
sb childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
sb low dose asa ec 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sm aspirin 325 mg tab	1	OTC Over the Counter
sm aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
sm aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sm aspirin ec 325 mg tab dr	1	OTC Over the Counter
sm aspirin ec low strength 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sm aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
sm aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
sm childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
st joseph aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
st joseph low dose 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
st joseph low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
tgt aspirin 325 mg tab	1	OTC Over the Counter
tgt aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
tgt aspirin 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
tgt aspirin ec 325 mg tab dr	1	OTC Over the Counter
tgt aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act OTC Over the Counter
tgt childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act OTC Over the Counter
ANALGESICS - OPIOID		
CODEINE COMBINATIONS		
ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION	1	QL 2700 / 30 days AL1 At least 12 yrs old
acetaminophen-codeine 120-12 mg/5ml solution	1	QL 2700 / 30 day(s) AL1 At least 12 yrs old
acetaminophen-codeine 300-15 mg tab	1	QL 360 / 30 day(s) AL1 At least 12 yrs old
acetaminophen-codeine 300-30 mg tab	1	QL 360 / 30 day(s) AL1 At least 12 yrs old
acetaminophen-codeine 300-60 mg tab	1	QL 180 / 30 day(s) AL1 At least 12 yrs old
HYDROCODONE COMBINATIONS		
hydrocodone-acetaminophen 10-325 mg tab	1	QL 180 / 30 day(s)
hydrocodone-acetaminophen 2.5-108 mg/5ml solution	1	QL 3600 / 30 day(s)
hydrocodone-acetaminophen 5-217 mg/10ml solution	1	QL 3600 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocodone-acetaminophen 5-325 mg tab	1	QL 360 / 30 day(s)
hydrocodone-acetaminophen 7.5-325 mg tab	1	QL 180 / 30 day(s)
hydrocodone-acetaminophen 7.5-325 mg/15ml solution	1	QL 3600 / 30 day(s)
hydrocodone-ibuprofen 7.5-200 mg tab	1	QL 150 / 30 day(s) AL1 At least 16 yrs old
lorcet 5-325 mg tab	1	QL 360 / 30 day(s)
lorcet hd 10-325 mg tab	1	QL 180 / 30 day(s)
lorcet plus 7.5-325 mg tab	1	QL 180 / 30 day(s)
OPIOID AGONISTS		
fentanyl 100 mcg/hr patch 72hr	2	QL 15 / 30 day(s) PA
fentanyl 12 mcg/hr patch 72hr	2	QL 15 / 30 day(s) PA
fentanyl 25 mcg/hr patch 72hr	2	QL 15 / 30 day(s) PA
fentanyl 50 mcg/hr patch 72hr	2	QL 15 / 30 day(s) PA
fentanyl 75 mcg/hr patch 72hr	2	QL 15 / 30 day(s) PA
hydromorphone hcl 2 mg tab	1	QL 180 / 30 day(s)
hydromorphone hcl 4 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
hydromorphone hcl 8 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
methadone hcl 10 mg tab	1	QL 90 / 30 day(s)
methadone hcl 10 mg/5ml solution	1	QL 450 / 30 day(s)
methadone hcl 10 mg/ml conc	1	QL 90 / 30 day(s)
methadone hcl 40 mg tab sol	1	QL 90 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methadone hcl 5 mg tab	1	QL 90 / 30 day(s)
methadone hcl 5 mg/5ml solution	1	QL 900 / 30 day(s)
methadone hcl intensol 10 mg/ml conc	1	QL 90 / 30 day(s)
methadose 40 mg tab sol	1	QL 90 / 30 day(s)
MORPHINE SULFATE 15 MG TAB	1	QL 240 / 30 day(s)
morphine sulfate 15 mg tab	1	QL 240 / 30 day(s)
MORPHINE SULFATE 30 MG TAB	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
morphine sulfate 30 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
morphine sulfate er 100 mg tab er	1	QL 90 / 30 day(s)
morphine sulfate er 15 mg tab er	1	QL 90 / 30 day(s)
morphine sulfate er 200 mg tab er	1	QL 90 / 30 day(s)
morphine sulfate er 30 mg tab er	1	QL 90 / 30 day(s)
morphine sulfate er 60 mg tab er	1	QL 90 / 30 day(s)
oxycodone hcl 10 mg tab	1	QL 180 / 30 day(s)
oxycodone hcl 15 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
oxycodone hcl 20 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
oxycodone hcl 30 mg tab	1	QL 180 / 30 day(s) AL1 At least 18 yrs old
oxycodone hcl 5 mg cap	1	QL 360 / 30 day(s)
oxycodone hcl 5 mg tab	1	QL 360 / 30 day(s)
oxymorphone hcl 10 mg tab	2	QL 180 / 30 day(s) AL1 At least 18 yrs old
oxymorphone hcl 5 mg tab	2	QL 180 / 30 day(s) AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tramadol hcl 50 mg tab	1	QL 240 / 30 day(s) AL1 At least 18 yrs old
tramadol hcl er 100 mg tab er 24h	1	QL 30 / 30 day(s) AL1 At least 18 yrs old
tramadol hcl er 200 mg tab er 24h	1	QL 30 / 30 day(s) AL1 At least 18 yrs old
tramadol hcl er 300 mg tab er 24h	1	QL 30 / 30 day(s) AL1 At least 18 yrs old
OPIOID COMBINATIONS		
endocet 10-325 mg tab	1	QL 180 / 30 day(s)
endocet 2.5-325 mg tab	1	QL 360 / 30 day(s)
endocet 5-325 mg tab	1	QL 360 / 30 day(s)
endocet 7.5-325 mg tab	1	QL 240 / 30 day(s)
oxycodone-acetaminophen 10-325 mg tab	1	QL 180 / 30 day(s)
oxycodone-acetaminophen 2.5-325 mg tab	1	QL 360 / 30 day(s)
oxycodone-acetaminophen 5-325 mg tab	1	QL 360 / 30 day(s)
oxycodone-acetaminophen 7.5-325 mg tab	1	QL 240 / 30 day(s)
OPIOID PARTIAL AGONISTS		
buprenorphine hcl 2 mg sl tab	1	QLC 15 / 90 day(s)
buprenorphine hcl 8 mg sl tab	1	QLC 15 / 90 day(s)
buprenorphine hcl-naloxone hcl 12-3 mg film	2	QL 90 / 30 day(s)
buprenorphine hcl-naloxone hcl 2-0.5 mg film	2	QL 90 / 30 day(s)
buprenorphine hcl-naloxone hcl 2-0.5 mg sl tab	1	QL 90 / 30 day(s)
buprenorphine hcl-naloxone hcl 4-1 mg film	2	QL 90 / 30 day(s)
buprenorphine hcl-naloxone hcl 8-2 mg film	2	QL 90 / 30 day(s)
buprenorphine hcl-naloxone hcl 8-2 mg sl tab	1	QL 90 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRAMADOL COMBINATIONS		
tramadol-acetaminophen 37.5-325 mg tab	1	QL 240 / 30 day(s) AL1 At least 18 yrs old
ANDROGENS-ANABOLIC		
ANABOLIC STEROIDS		
OXANDROLONE 10 MG TAB	2	PA
oxandrolone 10 mg tab	2	PA
OXANDROLONE 2.5 MG TAB	2	PA
oxandrolone 2.5 mg tab	2	PA
ANDROGENS		
danazol 100 mg cap	2	PA
danazol 200 mg cap	2	PA
danazol 50 mg cap	2	PA
depo-testosterone 100 mg/ml solution	1	QL 10 / 28 day(s) PA
depo-testosterone 200 mg/ml solution	1	QL 10 / 28 day(s) PA
testosterone 1.62 % gel	1	QL 150 / 30 day(s) PA
testosterone 12.5 mg/act (1%) gel	1	QL 300 / 30 day(s) PA
testosterone 20.25 mg/1.25gm (1.62%) gel	2	QL 37.5 / 30 day(s) PA
testosterone 20.25 mg/act (1.62%) gel	1	QL 150 / 30 day(s) PA
testosterone 25 mg/2.5gm (1%) gel	2	QL 150 / 30 day(s) PA
testosterone 30 mg/act solution	2	QL 180 / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
testosterone 40.5 mg/2.5gm (1.62%) gel	2	QL 150 / 30 day(s) PA
testosterone 50 mg/5gm (1%) gel	2	QL 300 / 30 day(s) PA
testosterone cypionate 100 mg/ml solution	1	QL 10 / 28 day(s) PA
testosterone cypionate 200 mg/ml solution	1	QL 10 / 28 day(s) PA
testosterone enanthate 200 mg/ml solution	1	QL 5 / 28 day(s) PA
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
hydrocortisone 100 mg/60ml enema	1	
NITRATE VASODILATING AGENTS		
RECTIV 0.4 % OINTMENT	2	
RECTAL ANESTHETIC/STEROIDS		
PROCTOFOAM HC 1-1 % FOAM	2	
RECTAL COMBINATIONS - MISC.		
avedana hemorrhoid pain relief 0.25-14-74.9 % ointment	1	OTC Over the Counter
avedana hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
avedana hemorroidal cooling 0.25-50 % gel	1	OTC Over the Counter
cvs hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
cvs hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
eq hemorrhoidal 0.25-85.39 % suppos	1	OTC Over the Counter
eql hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
eql hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
gnp hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
goodsense hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
goodsense hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
hemorrhoidal 0.25-3-85.5 % suppos	1	OTC Over the Counter
hemorrhoidal 0.25-85.39 % suppos	1	OTC Over the Counter
hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
hemorrhoidal cooling 0.25-50 % gel	1	OTC Over the Counter
hm hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
major-prep hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
preparation h 0.25-88.44 % suppos	1	OTC Over the Counter
px hemorrhoidal 0.25-3-85.5 % suppos	1	OTC Over the Counter
qc hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
qc hemorrhoidal 0.25-88.44 % suppos	1	OTC Over the Counter
ra hemorrhoidal 0.25-3-85.5 % suppos	1	OTC Over the Counter
sm hemorrhoidal 0.25-14-74.9 % ointment	1	OTC Over the Counter
sm hemorrhoidal cooling 0.25-50 % gel	1	OTC Over the Counter
RECTAL LOCAL ANESTHETICS		
numbcream 5 % cream	1	OTC Over the Counter
RECTAL STEROIDS		
anucort-hc 25 mg suppos	1	
anusol-hc 25 mg suppos	1	
hemmorex-hc 25 mg suppos	1	
hydrocortisone (perianal) 1 % cream	1	
hydrocortisone (perianal) 2.5 % cream	1	
hydrocortisone acetate 25 mg suppos	1	
preparation h 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
procto-med hc 2.5 % cream	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
procto-pak 1 % cream	1	
proctocort 1 % cream	1	
proctosol hc 2.5 % cream	1	
proctozone-hc 2.5 % cream	1	
ANTACIDS		
ANTACIDS - CALCIUM SALTS		
antacid 500 mg chew tab	1	OTC Over the Counter
antacid calcium 500 mg chew tab	1	OTC Over the Counter
antacid calcium rich 500 mg chew tab	1	OTC Over the Counter
antacid regular strength 500 mg chew tab	1	OTC Over the Counter
cal-gest antacid 500 mg chew tab	1	OTC Over the Counter
calcium antacid 500 mg chew tab	1	OTC Over the Counter
calcium carbonate 500 mg chew tab	1	OTC Over the Counter
calcium carbonate antacid 500 mg chew tab	1	OTC Over the Counter
eq antacid 500 mg chew tab	1	OTC Over the Counter
eql antacid 500 mg chew tab	1	OTC Over the Counter
ft antacid regular strength 500 mg chew tab	1	OTC Over the Counter
gnp antacid 500 mg chew tab	1	OTC Over the Counter
goodsense antacid 500 mg chew tab	1	OTC Over the Counter
healthy mama tame the flame 500 mg chew tab	1	OTC Over the Counter
hm antacid 500 mg chew tab	1	OTC Over the Counter
hm antacid regular strength 500 mg chew tab	1	OTC Over the Counter
hm calcium antacid 500 mg chew tab	1	OTC Over the Counter
long lasting antacid 500 mg chew tab	1	OTC Over the Counter
px calcium antacid 500 mg chew tab	1	OTC Over the Counter
qc antacid 500 mg chew tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ra antacid 500 mg chew tab	1	OTC Over the Counter
sb antacid 500 mg chew tab	1	OTC Over the Counter
sm antacid 500 mg chew tab	1	OTC Over the Counter
sm calcium antacid 500 mg chew tab	1	OTC Over the Counter
ANTHELMINTICS		
albendazole 200 mg tab	2	QL 120 / 30 day(s)
BENZNIDAZOLE 100 MG TAB	2	QL 1 / 60 day(s) AL1 2 to 12 yrs old
BENZNIDAZOLE 12.5 MG TAB	2	QL 1 / 60 day(s) AL1 2 to 12 yrs old
cvs pinworm treatment 144 (50 base) mg/ml suspension	1	OTC Over the Counter
ivermectin 3 mg tab	1	PA
pin-away 144 (50 base) mg/ml suspension	1	OTC Over the Counter
pinworm medicine 144 (50 base) mg/ml suspension	1	OTC Over the Counter
praziquantel 600 mg tab	2	
reeses pinworm medicine 144 (50 base) mg/ml suspension	1	OTC Over the Counter
ANTI-INFECTIVE AGENTS - MISC.		
metronidazole 250 mg tab	1	
metronidazole 375 mg cap	1	
metronidazole 500 mg tab	1	
pentamidine isethionate 300 mg recon soln	1	
tinidazole 250 mg tab	1	
tinidazole 500 mg tab	1	
TRIMETHOPRIM 100 MG TAB	1	
trimethoprim 100 mg tab	1	
XIFAXAN 200 MG TAB	2	QL 9 / Rx
XIFAXAN 550 MG TAB	2	QL 3 / day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-INFECTIVE MISC. - COMBINATIONS		
sulfamethoxazole-trimethoprim 200-40 mg/5ml suspension	1	
sulfamethoxazole-trimethoprim 400-80 mg tab	1	
sulfamethoxazole-trimethoprim 800-160 mg tab	1	
sulfatrim pediatric 200-40 mg/5ml suspension	1	
ANTIPROTOZOAL AGENTS		
ALINIA 100 MG/5ML RECON SUSP	1	QL 300 / 90 day(s)
atovaquone 750 mg/5ml suspension	2	
nitazoxanide 500 mg tab	2	QL 12 / 90 day(s)
GLYCOPEPTIDES		
FIRVANQ 25 MG/ML RECON SOLN	1	
FIRVANQ 50 MG/ML RECON SOLN	1	
vancomycin hcl 125 mg cap	1	
vancomycin hcl 25 mg/ml recon soln	1	
vancomycin hcl 250 mg cap	1	
vancomycin hcl 250 mg/5ml recon soln	1	
vancomycin hcl 50 mg/ml recon soln	1	
LEPROSTATICS		
dapsone 100 mg tab	1	
dapsone 25 mg tab	1	
LINCOSAMIDES		
clindamycin hcl 150 mg cap	1	QL 120 / 30 day(s)
clindamycin hcl 300 mg cap	1	QL 120 / 30 day(s)
clindamycin hcl 75 mg cap	1	QL 120 / 30 day(s)
clindamycin palmitate hcl 75 mg/5ml recon soln	1	QL 2100 / 30 day(s)
METHENAMINE COMBOS		
azo urinary tract defense 162-162.5 mg tab	1	OTC Over the Counter
cystex urinary pain relief 162-162.5 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gnp antibacterial urinary pain 162-162.5 mg tab	1	OTC Over the Counter
qc urinary pain relief 162-162.5 mg tab	1	
uro-pain dual action 162-162.5 mg tab	1	
MONOBACTAMS		
CAYSTON 75 MG RECON SOLN	3	S Specialty Drug
OXAZOLIDINONES		
linezolid 100 mg/5ml recon susp	2	QL 900 / 30 day(s)
linezolid 600 mg tab	2	QL 60 / 30 day(s)
URINARY ANTI-INFECTIVES		
fosfomycin tromethamine 3 gm packet	1	
methenamine hippurate 1 gm tab	1	
nitrofurantoin 25 mg/5ml suspension	2	
nitrofurantoin macrocrystal 100 mg cap	1	
nitrofurantoin macrocrystal 25 mg cap	1	
nitrofurantoin macrocrystal 50 mg cap	1	
nitrofurantoin monohyd macro 100 mg cap	1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
ranolazine er 1000 mg tab er 12h	1	QL 60 / 30 day(s)
ranolazine er 500 mg tab er 12h	1	QL 60 / 30 day(s)
NITRATES		
isosorbide dinitrate 10 mg tab	1	
isosorbide dinitrate 20 mg tab	1	
isosorbide dinitrate 30 mg tab	1	
isosorbide dinitrate 5 mg tab	1	
ISOSORBIDE MONONITRATE 10 MG TAB	1	
isosorbide mononitrate 10 mg tab	1	
ISOSORBIDE MONONITRATE 20 MG TAB	1	
isosorbide mononitrate 20 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
isosorbide mononitrate er 120 mg tab er 24h	1	
isosorbide mononitrate er 30 mg tab er 24h	1	
isosorbide mononitrate er 60 mg tab er 24h	1	
minitran 0.1 mg/hr patch 24hr	1	
minitran 0.2 mg/hr patch 24hr	1	
minitran 0.4 mg/hr patch 24hr	1	
minitran 0.6 mg/hr patch 24hr	1	
nitroglycerin 0.1 mg/hr patch 24hr	1	
nitroglycerin 0.2 mg/hr patch 24hr	1	
nitroglycerin 0.3 mg sl tab	1	
nitroglycerin 0.4 mg sl tab	1	
nitroglycerin 0.4 mg/hr patch 24hr	1	
nitroglycerin 0.4 mg/spray solution	2	
nitroglycerin 0.6 mg sl tab	1	
nitroglycerin 0.6 mg/hr patch 24hr	1	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
buspirone hcl 10 mg tab	1	
buspirone hcl 15 mg tab	1	
buspirone hcl 30 mg tab	1	
buspirone hcl 5 mg tab	1	
hydroxyzine hcl 10 mg tab	1	AL1 At least 2 yrs old
hydroxyzine hcl 10 mg/5ml syrup	1	AL1 At least 2 yrs old
hydroxyzine hcl 25 mg tab	1	AL1 At least 2 yrs old
hydroxyzine hcl 50 mg tab	1	AL1 At least 2 yrs old
hydroxyzine pamoate 25 mg cap	1	AL1 At least 2 yrs old
hydroxyzine pamoate 50 mg cap	1	AL1 At least 2 yrs old
BENZODIAZEPINES		
alprazolam 0.25 mg tab	1	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
alprazolam 0.5 mg tab	1	QL 120 / 30 day(s)
alprazolam 1 mg tab	1	QL 120 / 30 day(s)
alprazolam 2 mg tab	1	QL 150 / 30 day(s)
alprazolam er 0.5 mg tab er 24h	1	
alprazolam er 1 mg tab er 24h	1	
alprazolam er 2 mg tab er 24h	1	
alprazolam er 3 mg tab er 24h	1	
alprazolam xr 0.5 mg tab er 24h	1	
alprazolam xr 1 mg tab er 24h	1	
alprazolam xr 2 mg tab er 24h	1	
alprazolam xr 3 mg tab er 24h	1	
clorazepate dipotassium 15 mg tab	1	QL 180 / 30 day(s)
clorazepate dipotassium 3.75 mg tab	1	QL 720 / 30 day(s)
clorazepate dipotassium 7.5 mg tab	1	QL 360 / 30 day(s)
diazepam 10 mg tab	1	
diazepam 2 mg tab	1	
diazepam 5 mg tab	1	
diazepam 5 mg/5ml solution	1	
diazepam 5 mg/ml conc	1	
diazepam intensol 5 mg/ml conc	1	
lorazepam 0.5 mg tab	1	QL 90 / 30 day(s)
lorazepam 1 mg tab	1	QL 90 / 30 day(s)
lorazepam 2 mg tab	1	QL 150 / 30 day(s)
lorazepam 2 mg/ml conc	1	QL 150 / 30 day(s)
lorazepam intensol 2 mg/ml conc	1	QL 150 / 30 day(s)
oxazepam 10 mg cap	1	QL 120 / 30 day(s)
oxazepam 15 mg cap	1	QL 120 / 30 day(s)
oxazepam 30 mg cap	1	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
disopyramide phosphate 100 mg cap	1	
disopyramide phosphate 150 mg cap	1	
NORPACE CR 100 MG CAP ER 12H	1	
NORPACE CR 150 MG CAP ER 12H	1	
quinidine gluconate er 324 mg tab er	1	
QUINIDINE SULFATE 200 MG TAB	1	
quinidine sulfate 200 mg tab	1	
QUINIDINE SULFATE 300 MG TAB	1	
quinidine sulfate 300 mg tab	1	
ANTIARRHYTHMICS TYPE I-B		
mexiletine hcl 150 mg cap	1	
mexiletine hcl 200 mg cap	1	
mexiletine hcl 250 mg cap	1	
ANTIARRHYTHMICS TYPE I-C		
flecainide acetate 100 mg tab	1	
flecainide acetate 150 mg tab	1	
flecainide acetate 50 mg tab	1	
propafenone hcl 150 mg tab	1	
propafenone hcl 225 mg tab	1	
propafenone hcl 300 mg tab	1	
propafenone hcl er 225 mg cap er 12h	1	
propafenone hcl er 325 mg cap er 12h	1	
propafenone hcl er 425 mg cap er 12h	1	
ANTIARRHYTHMICS TYPE III		
amiodarone hcl 100 mg tab	1	
amiodarone hcl 200 mg tab	1	
amiodarone hcl 400 mg tab	1	
dofetilide 125 mcg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dofetilide 250 mcg cap	1	
dofetilide 500 mcg cap	1	
MULTAQ 400 MG TAB	2	
pacerone 100 mg tab	1	
pacerone 200 mg tab	1	
pacerone 400 mg tab	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ADRENERGIC COMBINATIONS		
ADVAIR DISKUS 100-50 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
ADVAIR DISKUS 250-50 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
ADVAIR DISKUS 500-50 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
ADVAIR HFA 115-21 MCG/ACT AEROSOL	1	QL 12 / 30 day(s)
ADVAIR HFA 230-21 MCG/ACT AEROSOL	1	QL 12 / 30 day(s)
ADVAIR HFA 45-21 MCG/ACT AEROSOL	1	QL 12 / 30 day(s)
ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
BREO ELLIPTA 100-25 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
BREO ELLIPTA 200-25 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
BREO ELLIPTA 50-25 MCG/INH AER POW BA	1	QL 60 / 30 day(s)
breyna 160-4.5 mcg/act aerosol	1	QL 10.3 / 30 day(s)
breyna 80-4.5 mcg/act aerosol	1	QL 10.3 / 30 day(s)
BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL	1	QL 10.7 / 30 day(s)
budesonide-formoterol fumarate 160-4.5 mcg/act aerosol	1	QL 10.3 / 30 day(s)
budesonide-formoterol fumarate 80-4.5 mcg/act aerosol	1	QL 10.3 / 30 day(s)
COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN	2	QL 8 / 30 day(s)
DULERA 100-5 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)
DULERA 200-5 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)
DULERA 50-5 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ipratropium-albuterol 0.5-2.5 (3) mg/3ml solution	1	
STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN	1	QL 4 / 30 day(s)
TRELEGY ELLIPTA 100-62.5-25 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
TRELEGY ELLIPTA 200-62.5-25 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
ANTI-IGE MONOCLONAL ANTIBODIES		
XOLAIR 150 MG/ML SOLN PRSYR	1	QL 5 / 30 day(s) PA AL1 At least 6 yrs old S Specialty Drug
XOLAIR 75 MG/0.5ML SOLN PRSYR	1	QL 1.2 / 30 day(s) PA AL1 At least 6 yrs old S Specialty Drug
ANTI-INFLAMMATORY AGENTS		
cromolyn sodium 20 mg/2ml nebu soln	1	
BETA ADRENERGICS		
albuterol sulfate (2.5 mg/3ml) 0.083% nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate (5 mg/ml) 0.5% nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate (5 mg/ml) 0.5% nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate 0.63 mg/3ml nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate 1.25 mg/3ml nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate 2 mg tab	1	
albuterol sulfate 2 mg/5ml syrup	1	
albuterol sulfate 2.5 mg/0.5ml nebu soln	1	QL 540 / 30 day(s)
albuterol sulfate 4 mg tab	1	
albuterol sulfate hfa 108 (90 base) mcg/act aero soln	1	QL 36 / 30 day(s)
arformoterol tartrate 15 mcg/2ml nebu soln	1	QL 120 / 30 day(s)
levalbuterol hcl 0.31 mg/3ml nebu soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levalbuterol hcl 0.63 mg/3ml nebu soln	1	
levalbuterol hcl 1.25 mg/0.5ml nebu soln	1	
levalbuterol hcl 1.25 mg/3ml nebu soln	1	
SEREVENT DISKUS 50 MCG/ACT AER POW BA	2	QL 60 / 30 day(s)
STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN	2	QL 4 / 30 day(s)
terbutaline sulfate 2.5 mg tab	1	
terbutaline sulfate 5 mg tab	1	
VENTOLIN HFA 108 (90 BASE) MCG/ACT AERO SOLN	1	QL 36 / 30 day(s)
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA 17 MCG/ACT AERO SOLN	2	QL 26 / 30 day(s)
INCRUSE ELLIPTA 62.5 MCG/ACT AER POW BA	1	QL 30 / 30 day(s)
ipratropium bromide 0.02 % solution	1	QL 375 / 30 day(s)
SPIRIVA HANDIHALER 18 MCG CAP	1	QL 30 / 30 day(s)
SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN	1	QL 4 / 30 day(s)
SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN	1	QL 4 / 30 day(s)
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)		
FASENRA PEN 30 MG/ML SOLN A-INJ	1	QL 1 / 56 day(s) PA AL1 At least 12 yrs old S Specialty Drug
NUCALA 100 MG/ML SOLN A-INJ	1	QL 3 / 28 day(s) PA AL1 At least 12 yrs old S Specialty Drug
NUCALA 100 MG/ML SOLN PRSYR	1	QL 3 / 28 day(s) PA AL1 At least 12 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEUKOTRIENE RECEPTOR ANTAGONISTS		
montelukast sodium 10 mg tab	1	QL 30 / 30 day(s)
montelukast sodium 4 mg chew tab	1	QL 30 / 30 day(s)
montelukast sodium 4 mg packet	1	QL 30 / 30 day(s)
montelukast sodium 5 mg chew tab	1	QL 30 / 30 day(s)
zafirlukast 10 mg tab	1	QL 60 / 30 day(s)
zafirlukast 20 mg tab	1	QL 60 / 30 day(s)
STEROID INHALANTS		
ARNUITY ELLIPTA 100 MCG/ACT AER POW BA	1	QL 30 / 30 day(s)
ARNUITY ELLIPTA 200 MCG/ACT AER POW BA	1	QL 30 / 30 day(s)
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA	1	QL 30 / 30 day(s)
ASMANEX (120 METERED DOSES) 220 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX (14 METERED DOSES) 220 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX (30 METERED DOSES) 110 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX (30 METERED DOSES) 220 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX (60 METERED DOSES) 220 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX (7 METERED DOSES) 110 MCG/ACT AER POW BA	1	QL 1 / 30 day(s)
ASMANEX HFA 100 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)
ASMANEX HFA 200 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)
ASMANEX HFA 50 MCG/ACT AEROSOL	1	QL 13 / 30 day(s)
budesonide 0.25 mg/2ml suspension	1	QL 120 / 30 day(s)
budesonide 0.5 mg/2ml suspension	1	QL 120 / 30 day(s)
budesonide 1 mg/2ml suspension	1	QL 120 / 30 day(s)
FLOVENT DISKUS 100 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLOVENT DISKUS 250 MCG/ACT AER POW BA	1	QL 240 / 30 day(s)
FLOVENT DISKUS 50 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
FLOVENT HFA 110 MCG/ACT AEROSOL	1	QL 12 / 30 day(s)
FLOVENT HFA 220 MCG/ACT AEROSOL	1	QL 24 / 30 day(s)
FLOVENT HFA 44 MCG/ACT AEROSOL	1	QL 10.6 / 30 day(s)
FLUTICASONE PROPIONATE DISKUS 100 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
FLUTICASONE PROPIONATE DISKUS 250 MCG/ACT AER POW BA	1	QL 240 / 30 day(s)
FLUTICASONE PROPIONATE DISKUS 50 MCG/ACT AER POW BA	1	QL 60 / 30 day(s)
FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL	1	QL 12 / 30 day(s)
FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL	1	QL 24 / 30 day(s)
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	1	QL 10.6 / 30 day(s)
QVAR REDIHALER 40 MCG/ACT AERO BA	1	QL 10.6 / 30 day(s)
QVAR REDIHALER 80 MCG/ACT AERO BA	1	QL 21.2 / 30 day(s)
XANTHINES		
elixophyllin 80 mg/15ml elixir	1	
theophylline 80 mg/15ml elixir	1	
theophylline 80 mg/15ml solution	1	
theophylline er 400 mg tab er 24h	1	
theophylline er 600 mg tab er 24h	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
jantoven 1 mg tab	1	
jantoven 10 mg tab	1	
jantoven 2 mg tab	1	
jantoven 2.5 mg tab	1	
jantoven 3 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
jantoven 4 mg tab	1	
jantoven 5 mg tab	1	
jantoven 6 mg tab	1	
jantoven 7.5 mg tab	1	
warfarin sodium 1 mg tab	1	
warfarin sodium 10 mg tab	1	
warfarin sodium 2 mg tab	1	
warfarin sodium 2.5 mg tab	1	
warfarin sodium 3 mg tab	1	
warfarin sodium 4 mg tab	1	
warfarin sodium 5 mg tab	1	
warfarin sodium 6 mg tab	1	
warfarin sodium 7.5 mg tab	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5 MG TAB	1	QL 60 / 30 day(s)
ELIQUIS 5 MG TAB	1	QL 74 / 30 day(s)
ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK	1	QLC 74 / 180 day(s)
XARELTO 1 MG/ML RECON SUSP	1	QL 620 / 30 days
XARELTO 10 MG TAB	1	QL 30 / 30 day(s)
XARELTO 15 MG TAB	1	QL 60 / 30 day(s)
XARELTO 2.5 MG TAB	1	QL 60 / 30 day(s)
XARELTO 20 MG TAB	1	QL 30 / 30 day(s)
XARELTO STARTER PACK 15 & 20 MG TAB THPK	1	QL 51 / 30 day(s)
HEPARINS AND HEPARINOID-LIKE AGENTS		
heparin sodium (porcine) 1000 unit/ml solution	1	
heparin sodium (porcine) 10000 unit/ml solution	1	
heparin sodium (porcine) 20000 unit/ml solution	1	
heparin sodium (porcine) 5000 unit/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
heparin sodium (porcine) pf 1000 unit/ml solution	1	
heparin sodium (porcine) pf 5000 unit/0.5ml solution	1	
HEPARIN SODIUM (PORCINE) PF 5000 UNIT/ML SOLUTION	1	
LOW MOLECULAR WEIGHT HEPARINS		
enoxaparin sodium 100 mg/ml soln prsyr	1	
enoxaparin sodium 120 mg/0.8ml soln prsyr	1	
enoxaparin sodium 150 mg/ml soln prsyr	1	
enoxaparin sodium 30 mg/0.3ml soln prsyr	1	
enoxaparin sodium 300 mg/3ml solution	1	QLC 30 / 90 day(s)
enoxaparin sodium 40 mg/0.4ml soln prsyr	1	
enoxaparin sodium 60 mg/0.6ml soln prsyr	1	
enoxaparin sodium 80 mg/0.8ml soln prsyr	1	
FRAGMIN 10000 UNIT/ML SOLN PRSYR	2	
FRAGMIN 12500 UNIT/0.5ML SOLN PRSYR	2	
FRAGMIN 15000 UNIT/0.6ML SOLN PRSYR	2	
FRAGMIN 18000 UNT/0.72ML SOLN PRSYR	2	
FRAGMIN 2500 UNIT/0.2ML SOLN PRSYR	2	
FRAGMIN 5000 UNIT/0.2ML SOLN PRSYR	2	
FRAGMIN 7500 UNIT/0.3ML SOLN PRSYR	2	
FRAGMIN 95000 UNIT/3.8ML SOLUTION	2	QLC 38 / 90 day(s)
SYNTHETIC HEPARINOID-LIKE AGENTS		
fondaparinux sodium 10 mg/0.8ml solution	2	QLC 24 / 90 day(s)
fondaparinux sodium 2.5 mg/0.5ml solution	2	QLC 15 / 90 day(s)
fondaparinux sodium 5 mg/0.4ml solution	2	QLC 12 / 90 day(s)
fondaparinux sodium 7.5 mg/0.6ml solution	2	QLC 18 / 90 day(s)
THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE		
dabigatran etexilate mesylate 150 mg cap	1	QL 60 / 30 day(s)
dabigatran etexilate mesylate 75 mg cap	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
clobazam 10 mg tab	1	
clobazam 2.5 mg/ml suspension	1	
clobazam 20 mg tab	1	
clonazepam 0.125 mg tab disp	1	QL 90 / 30 day(s)
clonazepam 0.25 mg tab disp	1	QL 90 / 30 day(s)
clonazepam 0.5 mg tab	1	QL 90 / 30 day(s)
clonazepam 0.5 mg tab disp	1	QL 90 / 30 day(s)
clonazepam 1 mg tab	1	QL 90 / 30 day(s)
clonazepam 1 mg tab disp	1	QL 90 / 30 day(s)
clonazepam 2 mg tab	1	QL 300 / 30 day(s)
clonazepam 2 mg tab disp	1	QL 300 / 30 day(s)
DIASTAT PEDIATRIC 2.5 MG GEL	2	QL 2.1 / 30 day(s)
diazepam 10 mg gel	1	QL 2.1 / 30 day(s)
diazepam 20 mg gel	1	QL 2.1 / 30 day(s)
ANTICONVULSANTS - MISC.		
carbamazepine 100 mg chew tab	1	
carbamazepine 100 mg/5ml suspension	1	
carbamazepine 200 mg tab	1	
carbamazepine er 100 mg cap er 12h	1	
carbamazepine er 100 mg tab er 12h	1	
carbamazepine er 200 mg cap er 12h	1	
carbamazepine er 200 mg tab er 12h	1	
carbamazepine er 300 mg cap er 12h	1	
carbamazepine er 400 mg tab er 12h	1	
DIACOMIT 250 MG CAP	3	QL 60 / 30 day(s) S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIACOMIT 250 MG PACKET	3	QL 60 / 30 day(s) S Specialty Drug
DIACOMIT 500 MG CAP	3	QL 60 / 30 day(s) S Specialty Drug
DIACOMIT 500 MG PACKET	3	QL 60 / 30 day(s) S Specialty Drug
EPIDIOLEX 100 MG/ML SOLUTION	3	PA S Specialty Drug
epitol 200 mg tab	1	
gabapentin 100 mg cap	1	QL 270 / 30 day(s)
gabapentin 250 mg/5ml solution	1	QL 2160 / 30 day(s)
gabapentin 300 mg cap	1	QL 270 / 30 day(s)
gabapentin 300 mg/6ml solution	1	QL 2160 / 30 day(s)
gabapentin 400 mg cap	1	QL 270 / 30 day(s)
gabapentin 600 mg tab	1	QL 180 / 30 day(s)
gabapentin 800 mg tab	1	QL 150 / 30 day(s)
lacosamide 10 mg/ml solution	1	
lacosamide 100 mg tab	1	
lacosamide 150 mg tab	1	
lacosamide 200 mg tab	1	
lacosamide 50 mg tab	1	
lamotrigine 100 mg tab	1	
lamotrigine 150 mg tab	1	
lamotrigine 200 mg tab	1	
lamotrigine 25 mg chew tab	1	
lamotrigine 25 mg tab	1	
lamotrigine 5 mg chew tab	1	
lamotrigine er 100 mg tab er 24h	1	
lamotrigine er 200 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamotrigine er 25 mg tab er 24h	1	
lamotrigine er 250 mg tab er 24h	1	
lamotrigine er 300 mg tab er 24h	1	
lamotrigine er 50 mg tab er 24h	1	
lamotrigine starter kit-blue 35 x 25 mg kit	1	
lamotrigine starter kit-green 84 x 25 mg & 14x100 mg kit	1	
lamotrigine starter kit-orange 42 x 25 mg & 7 x 100 mg kit	1	
levetiracetam 100 mg/ml solution	1	QL 946 / 30 day(s)
levetiracetam 1000 mg tab	1	
levetiracetam 250 mg tab	1	
levetiracetam 500 mg tab	1	
levetiracetam 750 mg tab	1	
levetiracetam er 500 mg tab er 24h	1	
levetiracetam er 750 mg tab er 24h	1	
oxcarbazepine 150 mg tab	1	
oxcarbazepine 300 mg tab	1	
oxcarbazepine 300 mg/5ml suspension	1	
oxcarbazepine 600 mg tab	1	
pregabalin 100 mg cap	1	QL 90 / 30 day(s)
pregabalin 150 mg cap	1	QL 90 / 30 day(s)
pregabalin 20 mg/ml solution	1	QL 900 / 30 day(s)
pregabalin 200 mg cap	1	QL 90 / 30 day(s)
pregabalin 225 mg cap	1	QL 60 / 30 day(s)
pregabalin 25 mg cap	1	QL 90 / 30 day(s)
pregabalin 300 mg cap	1	QL 60 / 30 day(s)
pregabalin 50 mg cap	1	QL 90 / 30 day(s)
pregabalin 75 mg cap	1	QL 90 / 30 day(s)
primidone 250 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
primidone 50 mg tab	1	
roweepra 1000 mg tab	1	
roweepra 500 mg tab	1	
roweepra 750 mg tab	1	
roweepra xr 500 mg tab er 24h	1	
roweepra xr 750 mg tab er 24h	1	
rufinamide 200 mg tab	1	
rufinamide 40 mg/ml suspension	1	
rufinamide 400 mg tab	1	
subvenite 100 mg tab	1	
subvenite 150 mg tab	1	
subvenite 200 mg tab	1	
subvenite 25 mg tab	1	
subvenite starter kit-blue 35 x 25 mg kit	1	
subvenite starter kit-green 84 x 25 mg & 14x100 mg kit	1	
subvenite starter kit-orange 42 x 25 mg & 7 x 100 mg kit	1	
topiramate 100 mg tab	1	
topiramate 15 mg cap sprink	1	
topiramate 200 mg tab	1	
topiramate 25 mg cap sprink	1	
topiramate 25 mg tab	1	
topiramate 50 mg tab	1	
topiramate er 100 mg cp24 sprnk	1	QL 30 / 30 day(s) PA
topiramate er 150 mg cp24 sprnk	1	QL 30 / 30 day(s) PA
topiramate er 200 mg cp24 sprnk	1	QL 60 / 30 day(s) PA
topiramate er 25 mg cp24 sprnk	1	QL 30 / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
topiramate er 50 mg cp24 sprnk	1	QL 30 / 30 day(s) PA
zonisamide 100 mg cap	1	
zonisamide 25 mg cap	1	
zonisamide 50 mg cap	1	
CARBAMATES		
felbamate 400 mg tab	1	
felbamate 600 mg tab	1	
felbamate 600 mg/5ml suspension	1	
GABA MODULATORS		
tiagabine hcl 12 mg tab	1	
tiagabine hcl 16 mg tab	1	
tiagabine hcl 2 mg tab	1	
tiagabine hcl 4 mg tab	1	
vigabatrin 500 mg packet	3	QL 180 / 30 day(s) S Specialty Drug
vigabatrin 500 mg tab	3	QL 180 / 30 day(s) S Specialty Drug
vigadrone 500 mg packet	3	QL 180 / 30 day(s) S Specialty Drug
vigadrone 500 mg tab	3	QL 180 / 30 day(s) S Specialty Drug
vigpoder 500 mg packet	3	QL 180 / 30 day(s) S Specialty Drug
HYDANTOINS		
DILANTIN 30 MG CAP	1	
phenytek 200 mg cap	1	
phenytek 300 mg cap	1	
phenytoin 100 mg/4ml suspension	1	
phenytoin 125 mg/5ml suspension	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phenytoin 50 mg chew tab	1	
phenytoin infatabs 50 mg chew tab	1	
phenytoin sodium extended 100 mg cap	1	
phenytoin sodium extended 200 mg cap	1	
phenytoin sodium extended 300 mg cap	1	
SUCCINIMIDES		
ethosuximide 250 mg cap	1	
ethosuximide 250 mg/5ml solution	1	
VALPROIC ACID		
divalproex sodium 125 mg cap dr	1	
divalproex sodium 125 mg tab dr	1	
divalproex sodium 250 mg tab dr	1	
divalproex sodium 500 mg tab dr	1	
divalproex sodium er 250 mg tab er 24h	1	
divalproex sodium er 500 mg tab er 24h	1	
valproic acid 250 mg cap	1	
valproic acid 250 mg/5ml solution	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
mirtazapine 15 mg tab	1	
mirtazapine 15 mg tab disp	1	
mirtazapine 30 mg tab	1	
mirtazapine 30 mg tab disp	1	
mirtazapine 45 mg tab	1	
mirtazapine 45 mg tab disp	1	
mirtazapine 7.5 mg tab	1	
ANTIDEPRESSANTS - MISC.		
bupropion hcl 100 mg tab	1	
bupropion hcl 75 mg tab	1	
bupropion hcl er (sr) 100 mg tab er 12h	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bupropion hcl er (sr) 150 mg tab er 12h	1	QL 60 / 30 day(s)
bupropion hcl er (sr) 200 mg tab er 12h	1	QL 60 / 30 day(s)
bupropion hcl er (xl) 150 mg tab er 24h	1	
bupropion hcl er (xl) 300 mg tab er 24h	1	QL 30 / 30 day(s)
BUPROPION HCL ER (XL) 450 MG TAB ER 24H	2	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
PHENELZINE SULFATE 15 MG TAB	1	QL 180 / 30 day(s)
phenelzine sulfate 15 mg tab	1	QL 180 / 30 day(s)
tranylcypromine sulfate 10 mg tab	1	QL 180 / 30 day(s)
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
citalopram hydrobromide 10 mg tab	1	
citalopram hydrobromide 10 mg/5ml solution	1	QL 600 / 30 day(s)
citalopram hydrobromide 20 mg tab	1	
citalopram hydrobromide 40 mg tab	1	
escitalopram oxalate 10 mg tab	1	
escitalopram oxalate 20 mg tab	1	
escitalopram oxalate 5 mg tab	1	
escitalopram oxalate 5 mg/5ml solution	1	QL 600 / 30 day(s)
fluoxetine hcl 10 mg cap	1	
fluoxetine hcl 20 mg cap	1	
fluoxetine hcl 20 mg/5ml solution	1	QL 600 / 30 day(s)
fluoxetine hcl 40 mg cap	1	
fluvoxamine maleate 100 mg tab	1	
fluvoxamine maleate 25 mg tab	1	
fluvoxamine maleate 50 mg tab	1	
paroxetine hcl 10 mg tab	1	
paroxetine hcl 20 mg tab	1	
paroxetine hcl 30 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
paroxetine hcl 40 mg tab	1	
paroxetine hcl er 12.5 mg tab er 24h	1	
paroxetine hcl er 25 mg tab er 24h	1	
paroxetine hcl er 37.5 mg tab er 24h	1	
sertraline hcl 100 mg tab	1	
sertraline hcl 20 mg/ml conc	1	QL 300 / 30 day(s)
sertraline hcl 25 mg tab	1	
sertraline hcl 50 mg tab	1	
SEROTONIN MODULATORS		
trazodone hcl 100 mg tab	1	
trazodone hcl 150 mg tab	1	
trazodone hcl 50 mg tab	1	
vilazodone hcl 10 mg tab	1	QL 30 / 30 day(s)
vilazodone hcl 20 mg tab	1	QL 30 / 30 day(s)
vilazodone hcl 40 mg tab	1	QL 30 / 30 day(s)
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
desvenlafaxine succinate er 100 mg tab er 24h	1	
desvenlafaxine succinate er 25 mg tab er 24h	1	
desvenlafaxine succinate er 50 mg tab er 24h	1	
duloxetine hcl 20 mg cp dr part	1	
duloxetine hcl 30 mg cp dr part	1	
duloxetine hcl 60 mg cp dr part	1	
venlafaxine hcl 100 mg tab	1	
venlafaxine hcl 25 mg tab	1	
venlafaxine hcl 37.5 mg tab	1	
venlafaxine hcl 50 mg tab	1	
venlafaxine hcl 75 mg tab	1	
venlafaxine hcl er 150 mg cap er 24h	1	
venlafaxine hcl er 37.5 mg cap er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
venlafaxine hcl er 75 mg cap er 24h	1	
TRICYCLIC AGENTS		
amitriptyline hcl 10 mg tab	1	
amitriptyline hcl 100 mg tab	1	
amitriptyline hcl 150 mg tab	1	
amitriptyline hcl 25 mg tab	1	
amitriptyline hcl 50 mg tab	1	
amitriptyline hcl 75 mg tab	1	
clomipramine hcl 25 mg cap	1	
clomipramine hcl 50 mg cap	1	
clomipramine hcl 75 mg cap	1	
desipramine hcl 10 mg tab	1	
desipramine hcl 100 mg tab	1	
desipramine hcl 150 mg tab	1	
desipramine hcl 25 mg tab	1	
desipramine hcl 50 mg tab	1	
desipramine hcl 75 mg tab	1	
doxepin hcl 10 mg cap	1	
doxepin hcl 10 mg/ml conc	1	
doxepin hcl 100 mg cap	1	
doxepin hcl 150 mg cap	1	
doxepin hcl 25 mg cap	1	
doxepin hcl 50 mg cap	1	
doxepin hcl 75 mg cap	1	
imipramine hcl 10 mg tab	1	
imipramine hcl 25 mg tab	1	
imipramine hcl 50 mg tab	1	
nortriptyline hcl 10 mg cap	1	
nortriptyline hcl 25 mg cap	1	
nortriptyline hcl 50 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nortriptyline hcl 75 mg cap	1	
trimipramine maleate 100 mg cap	2	
trimipramine maleate 25 mg cap	2	
trimipramine maleate 50 mg cap	2	
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
acarbose 100 mg tab	1	QL 90 / 30 day(s)
acarbose 25 mg tab	1	QL 360 / 30 day(s)
acarbose 50 mg tab	1	QL 180 / 30 day(s)
MIGLITOL 100 MG TAB	1	QL 90 / 30 day(s)
miglitol 100 mg tab	1	QL 90 / 30 day(s)
MIGLITOL 25 MG TAB	1	QL 90 / 30 day(s)
miglitol 25 mg tab	1	QL 90 / 30 day(s)
MIGLITOL 50 MG TAB	1	QL 90 / 30 day(s)
miglitol 50 mg tab	1	QL 90 / 30 day(s)
BIGUANIDES		
metformin hcl 1000 mg tab	1	
metformin hcl 500 mg tab	1	
metformin hcl 500 mg/5ml solution	1	
metformin hcl 850 mg tab	1	
metformin hcl er 500 mg tab er 24h	1	QL 120 / 30 day(s)
metformin hcl er 750 mg tab er 24h	1	QL 60 / 30 day(s)
DIABETIC OTHER		
BAQSIMI ONE PACK 3 MG/DOSE POWDER	2	
BAQSIMI TWO PACK 3 MG/DOSE POWDER	2	
cvs glucose 15 gm/38gm gel	1	OTC Over the Counter
CVS GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs glucose 40 % gel	1	OTC Over the Counter
CVS SOFT GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
DEX4 QUICK DISSOLVE GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
diazoxide 50 mg/ml suspension	2	
GLUCAGON EMERGENCY 1 MG KIT	1	
GLUCAGON EMERGENCY 1 MG/ML RECON SOLN	2	
gluco burst 40 % gel	1	OTC Over the Counter
gluco to go 15 40 % gel	1	OTC Over the Counter
GLUCO TO GO 4 GM CHEW TAB	1	OTC Over the Counter
GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
glucose 40 % gel	1	OTC Over the Counter
glutose 15 40 % gel	1	OTC Over the Counter
glutose 45 40 % gel	1	OTC Over the Counter
glutose 5 40 % gel	1	OTC Over the Counter
GNP GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
GNP QUICK DISSOLVE GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
LEADER QUICK DISSOLVE GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
relion glucose 15 gm/38gm gel	1	OTC Over the Counter
SM GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
sweet cheeks 40 % gel	1	OTC Over the Counter
TRUEPLUS GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
TRUEPLUS GLUCOSE ON THE GO 4 GM CHEW TAB	1	OTC Over the Counter
value plus glucose 40 % gel	1	OTC Over the Counter
WALGREENS GLUCOSE 4 GM CHEW TAB	1	OTC Over the Counter
DIABETIC OTHER - COMBINATIONS		
CVS GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEX4 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
DEX4 GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
DEX4 NATURALS 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
DEX4 POUCH PACK 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
GLUCOSE INSTANT ENERGY 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
GLUCOSE INSTANT ENERGY 6-4 MG-GM CHEW TAB	1	OTC Over the Counter
GLUCOSE-VITAMIN C 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
GNP GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
GOODSENSE GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
HM GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
HY-VEE GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
KROGER GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
LEADER GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
LONGS GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
MEIJER GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
PREFERRED PLUS GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
PX GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
RA GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
RA GLUCOSE 6-4 MG-GM CHEW TAB	1	OTC Over the Counter
RELION GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
SM GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
SMART SENSE GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
TGT GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
UP & UP GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALUE PLUS GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
WALGREENS GLUCOSE 4-6 GM-MG CHEW TAB	1	OTC Over the Counter
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100 MG TAB	1	QL 30 / 30 day(s)
JANUVIA 25 MG TAB	1	QL 30 / 30 day(s)
JANUVIA 50 MG TAB	1	QL 30 / 30 day(s)
DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS		
JANUMET 50-1000 MG TAB	1	QL 60 / 30 day(s)
JANUMET 50-500 MG TAB	1	QL 60 / 30 day(s)
JANUMET XR 100-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
JANUMET XR 50-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
JANUMET XR 50-500 MG TAB ER 24H	1	QL 30 / 30 day(s)
HUMAN INSULIN		
FIASP 100 UNIT/ML SOLUTION	2	QL 100 / 30 day(s)
FIASP FLEXTOUCH 100 UNIT/ML SOLN PEN	2	QL 100 / 30 day(s)
FIASP PENFILL 100 UNIT/ML SOLN CART	2	QL 100 / 30 day(s)
FIASP PUMPCART 100 UNIT/ML SOLN CART	2	QL 100 / 30 day(s)
HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION	2	QL 100 / 30 day(s)
HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN	2	QL 100 / 30 day(s)
INSULIN GLARGINE MAX SOLOSTAR 300 UNIT/ML SOLN PEN	2	QL 100 / 30 days
INSULIN GLARGINE SOLOSTAR 300 UNIT/ML SOLN PEN	2	QL 100 / 30 days
LEVEMIR 100 UNIT/ML SOLUTION	2	QL 100 / 30 day(s)
LEVEMIR FLEXPEN 100 UNIT/ML SOLN PEN	2	QL 100 / 30 day(s)
LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN	2	QL 100 / 30 day(s)
NOVOLIN 70/30 (70-30) 100 UNIT/ML SUSPENSION	2	QL 100 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLIN 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	2	QL 100 / 30 day(s) OTC Over the Counter
NOVOLIN N 100 UNIT/ML SUSPENSION	2	QL 100 / 30 day(s) OTC Over the Counter
NOVOLIN N FLEXPEN 100 UNIT/ML SUSP PEN	2	QL 100 / 30 day(s) OTC Over the Counter
NOVOLIN R 100 UNIT/ML SOLUTION	2	QL 100 / 30 day(s) OTC Over the Counter
NOVOLIN R FLEXPEN 100 UNIT/ML SOLN PEN	2	QL 100 / 30 day(s) OTC Over the Counter
NOVOLOG 100 UNIT/ML SOLUTION	1	QL 100 / 30 day(s)
NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN	1	QL 100 / 30 day(s)
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION	2	QL 100 / 30 day(s)
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	2	QL 100 / 30 day(s)
NOVOLOG PENFILL 100 UNIT/ML SOLN CART	2	QL 100 / 30 day(s)
SEMGLEE (YFGN) 100 UNIT/ML SOLN PEN	1	QL 100 / 30 day(s)
SEMGLEE (YFGN) 100 UNIT/ML SOLUTION	1	QL 100 / 30 day(s)
TOUJEO MAX SOLOSTAR 300 UNIT/ML SOLN PEN	2	QL 100 / 30 days
TOUJEO SOLOSTAR 300 UNIT/ML SOLN PEN	2	QL 100 / 30 days
INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS)		
MOUNJARO 10 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
MOUNJARO 12.5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
MOUNJARO 15 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
MOUNJARO 2.5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOUNJARO 5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
MOUNJARO 7.5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/1.5ML SOLN PEN	1	QL 1.5 / 28 day(s) PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN	1	QL 3 / 28 day(s) PA
OZEMPIC (1 MG/DOSE) 2 MG/1.5ML SOLN PEN	1	QL 3 / 28 day(s) PA
OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN	1	QL 0.1072 / 1 day(s) PA
OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN	1	QL 3 / 28 day(s) PA
RYBELSUS 14 MG TAB	1	QL 30 / 30 day(s) PA
RYBELSUS 3 MG TAB	1	QL 30 / 30 day(s) PA
RYBELSUS 7 MG TAB	1	QL 30 / 30 day(s) PA
TRULICITY 0.75 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
TRULICITY 1.5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
TRULICITY 3 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA
TRULICITY 4.5 MG/0.5ML SOLN PEN	1	QL 2 / 28 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEGLITINIDE ANALOGUES		
nateglinide 120 mg tab	1	QL 90 / 30 day(s)
nateglinide 60 mg tab	1	QL 90 / 30 day(s)
repaglinide 0.5 mg tab	1	QL 120 / 30 day(s)
repaglinide 1 mg tab	1	QL 120 / 30 day(s)
repaglinide 2 mg tab	1	QL 240 / 30 day(s)
SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB		
TRIJARDY XR 10-5-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
TRIJARDY XR 25-5-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
TRIJARDY XR 5-2.5-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS		
GLYXAMBI 10-5 MG TAB	1	QL 30 / 30 day(s)
GLYXAMBI 25-5 MG TAB	1	QL 30 / 30 day(s)
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10 MG TAB	1	QL 30 / 30 day(s)
FARXIGA 5 MG TAB	1	QL 30 / 30 day(s)
JARDIANCE 10 MG TAB	1	QL 30 / 30 day(s)
JARDIANCE 25 MG TAB	1	QL 30 / 30 day(s)
SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB		
SYNJARDY 12.5-1000 MG TAB	1	QL 60 / 30 day(s)
SYNJARDY 12.5-500 MG TAB	1	QL 60 / 30 day(s)
SYNJARDY 5-1000 MG TAB	1	QL 60 / 30 day(s)
SYNJARDY 5-500 MG TAB	1	QL 60 / 30 day(s)
SYNJARDY XR 10-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
SYNJARDY XR 12.5-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNJARDY XR 25-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
SYNJARDY XR 5-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
XIGDUO XR 10-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
XIGDUO XR 10-500 MG TAB ER 24H	1	QL 30 / 30 day(s)
XIGDUO XR 2.5-1000 MG TAB ER 24H	1	QL 30 / 30 day(s)
XIGDUO XR 5-1000 MG TAB ER 24H	1	QL 60 / 30 day(s)
XIGDUO XR 5-500 MG TAB ER 24H	1	QL 30 / 30 day(s)
SULFONYLUREA-BIGUANIDE COMBINATIONS		
glipizide-metformin hcl 2.5-250 mg tab	1	QL 240 / 30 day(s)
glipizide-metformin hcl 2.5-500 mg tab	1	QL 120 / 30 day(s)
glipizide-metformin hcl 5-500 mg tab	1	QL 120 / 30 day(s)
glyburide-metformin 1.25-250 mg tab	1	QL 240 / 30 day(s)
glyburide-metformin 2.5-500 mg tab	1	QL 120 / 30 day(s)
glyburide-metformin 5-500 mg tab	1	QL 120 / 30 day(s)
SULFONYLUREAS		
glimepiride 1 mg tab	1	
glimepiride 2 mg tab	1	
glimepiride 4 mg tab	1	
glipizide 10 mg tab	1	
glipizide 5 mg tab	1	
glipizide er 10 mg tab er 24h	1	
glipizide er 2.5 mg tab er 24h	1	
glipizide er 5 mg tab er 24h	1	
glipizide xl 10 mg tab er 24h	1	
glipizide xl 2.5 mg tab er 24h	1	
glipizide xl 5 mg tab er 24h	1	
glyburide 1.25 mg tab	1	
glyburide 2.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glyburide 5 mg tab	1	
GLYBURIDE MICRONIZED 1.5 MG TAB	1	
glyburide micronized 1.5 mg tab	1	
GLYBURIDE MICRONIZED 3 MG TAB	1	
glyburide micronized 3 mg tab	1	
GLYBURIDE MICRONIZED 6 MG TAB	1	
glyburide micronized 6 mg tab	1	
THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS		
pioglitazone hcl-metformin hcl 15-500 mg tab	1	QL 90 / 30 day(s)
pioglitazone hcl-metformin hcl 15-850 mg tab	1	QL 90 / 30 day(s)
THIAZOLIDINEDIONES		
pioglitazone hcl 15 mg tab	1	QL 30 / 30 day(s)
pioglitazone hcl 30 mg tab	1	QL 30 / 30 day(s)
pioglitazone hcl 45 mg tab	1	QL 30 / 30 day(s)
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
bismatrol 262 mg/15ml suspension	1	OTC Over the Counter
bismuth subsalicylate 525 mg/30ml suspension	1	OTC Over the Counter
cvs anti-diarrheal 262 mg/15ml suspension	1	OTC Over the Counter
cvs stomach relief 262 mg tab	1	OTC Over the Counter
cvs stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
diarrhea 262 mg/15ml suspension	1	OTC Over the Counter
diotame instydose 262 mg/15ml suspension	1	OTC Over the Counter
eq stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
eql stomach relief 262 mg tab	1	OTC Over the Counter
eql stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
eql stomach relief 525 mg/30ml suspension	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ft stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
geri-pectate 262 mg/15ml suspension	1	OTC Over the Counter
gnp pink bismuth 262 mg tab	1	OTC Over the Counter
gnp stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
gnp stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
goodsense stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
hm stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
kaopectate 262 mg tab	1	OTC Over the Counter
kaopectate 262 mg/15ml suspension	1	OTC Over the Counter
pink bismuth 262 mg/15ml suspension	1	OTC Over the Counter
px stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
qc diarrhea relief 262 mg/15ml suspension	1	OTC Over the Counter
qc pink bismuth 262 mg tab	1	OTC Over the Counter
qc pink bismuth 262 mg/15ml suspension	1	OTC Over the Counter
qc stomach relief 262 mg tab	1	OTC Over the Counter
qc stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
ra stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
sb bismuth 262 mg tab	1	OTC Over the Counter
sm stomach relief 262 mg tab	1	OTC Over the Counter
sm stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
sm stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
soothe 262 mg tab	1	OTC Over the Counter
soothe 262 mg/15ml suspension	1	OTC Over the Counter
soothe 525 mg/30ml suspension	1	OTC Over the Counter
stomach relief 262 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
stomach relief 262 mg/15ml suspension	1	OTC Over the Counter
stomach relief 525 mg/30ml suspension	1	OTC Over the Counter
stomach relief 527 mg/30ml suspension	1	OTC Over the Counter
tgt stomach relief 262 mg tab	1	OTC Over the Counter
ANTIPERISTALTIC AGENTS		
ANTI-DIARRHEAL 1 MG/5ML LIQUID	1	OTC Over the Counter
anti-diarrheal 2 mg cap	1	OTC Over the Counter
anti-diarrheal 2 mg tab	1	OTC Over the Counter
cvs anti-diarrheal 2 mg cap	1	OTC Over the Counter
cvs anti-diarrheal 2 mg tab	1	OTC Over the Counter
diamode 2 mg tab	1	OTC Over the Counter
diphenoxylate-atropine 2.5-0.025 mg tab	1	
eq anti-diarrheal 2 mg cap	1	OTC Over the Counter
eq anti-diarrheal 2 mg tab	1	OTC Over the Counter
eql anti-diarrheal 2 mg tab	1	OTC Over the Counter
ft anti-diarrheal 2 mg cap	1	OTC Over the Counter
ft anti-diarrheal 2 mg tab	1	OTC Over the Counter
gnp anti-diarrheal 2 mg cap	1	OTC Over the Counter
gnp anti-diarrheal 2 mg tab	1	OTC Over the Counter
hm anti-diarrheal 2 mg cap	1	OTC Over the Counter
hm anti-diarrheal 2 mg tab	1	OTC Over the Counter
hm loperamide hcl 2 mg cap	1	OTC Over the Counter
kls anti-diarrheal 2 mg tab	1	OTC Over the Counter
loperamide hcl 2 mg tab	1	OTC Over the Counter
meijer anti-diarrheal 2 mg tab	1	OTC Over the Counter
mm anti-diarrheal 2 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
px anti-diarrheal 2 mg tab	1	OTC Over the Counter
qc anti-diarrheal 2 mg cap	1	OTC Over the Counter
qc anti-diarrheal 2 mg tab	1	OTC Over the Counter
ra anti-diarrheal 2 mg cap	1	OTC Over the Counter
ra anti-diarrheal 2 mg tab	1	OTC Over the Counter
sb anti-diarrhea 2 mg tab	1	OTC Over the Counter
sm anti-diarrheal 2 mg cap	1	OTC Over the Counter
sm anti-diarrheal 2 mg tab	1	OTC Over the Counter
tgt anti-diarrheal 2 mg tab	1	OTC Over the Counter
tgt loperamide hcl 2 mg cap	1	OTC Over the Counter
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET 100 MG CAP	2	
deferasirox 125 mg tab sol	2	S Specialty Drug
deferasirox 180 mg tab	2	S Specialty Drug
deferasirox 250 mg tab sol	2	S Specialty Drug
deferasirox 360 mg tab	1	S Specialty Drug
deferasirox 500 mg tab sol	2	S Specialty Drug
deferasirox 90 mg tab	2	S Specialty Drug
deferiprone 500 mg tab	2	S Specialty Drug
FERRIPROX 100 MG/ML SOLUTION	3	S Specialty Drug
FERRIPROX 1000 MG TAB	3	S Specialty Drug
OPIOID ANTAGONISTS		
naloxone hcl 0.4 mg/ml solution	1	
naloxone hcl 2 mg/2ml soln prsyr	1	
naloxone hcl 4 mg/0.1ml liquid	1	QL 2 / rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
naloxone hcl 4 mg/10ml solution	1	
naltrexone hcl 50 mg tab	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
granisetron hcl 1 mg tab	2	QL 14 / 30 day(s)
ondansetron 4 mg tab disp	1	QLC 21 / 30 day(s)
ondansetron 8 mg tab disp	1	QLC 21 / 30 day(s)
ondansetron hcl 4 mg tab	1	QLC 21 / 30 day(s)
ondansetron hcl 4 mg/5ml solution	1	QLC 100 / 30 day(s)
ondansetron hcl 8 mg tab	1	QLC 21 / 30 day(s)
ANTIEMETICS - ANTICHOLINERGIC		
bonine 25 mg chew tab	1	OTC Over the Counter
cvs motion sickness 50 mg tab	1	OTC Over the Counter
cvs motion sickness relief 25 mg chew tab	1	OTC Over the Counter
dramamine motion sickness 25 mg chew tab	1	OTC Over the Counter
driminate 50 mg tab	1	OTC Over the Counter
eq motion sickness relief 50 mg tab	1	OTC Over the Counter
ft motion sickness 50 mg tab	1	OTC Over the Counter
gnp motion sickness relief 50 mg tab	1	OTC Over the Counter
goodsense motion sickness 50 mg tab	1	OTC Over the Counter
hm motion sickness 50 mg tab	1	OTC Over the Counter
hm motion sickness relief 50 mg tab	1	OTC Over the Counter
meclizine hcl 12.5 mg tab	1	
meclizine hcl 25 mg chew tab	1	OTC Over the Counter
meclizine hcl 25 mg tab	1	
motion sickness relief 25 mg chew tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
motion sickness relief 50 mg tab	1	OTC Over the Counter
motion-time 25 mg chew tab	1	OTC Over the Counter
qc motion sickness relief 50 mg tab	1	OTC Over the Counter
qc travel ease 25 mg chew tab	1	OTC Over the Counter
ra motion sickness relief 25 mg chew tab	1	OTC Over the Counter
ra motion sickness relief 50 mg tab	1	OTC Over the Counter
sb motion sickness 50 mg tab	1	OTC Over the Counter
scopolamine 1 mg/3days patch 72hr	1	
sm motion sickness 50 mg tab	1	OTC Over the Counter
sm motion sickness relief 50 mg tab	1	OTC Over the Counter
trav-tabs 50 mg tab	1	OTC Over the Counter
travel sickness 25 mg chew tab	1	OTC Over the Counter
travel sickness 50 mg tab	1	OTC Over the Counter
trimethobenzamide hcl 300 mg cap	1	
wal-dram 50 mg tab	1	OTC Over the Counter
ANTIEMETICS - MISCELLANEOUS		
dronabinol 10 mg cap	2	QL 150 / 30 day(s)
dronabinol 2.5 mg cap	2	QL 150 / 30 day(s)
dronabinol 5 mg cap	2	QL 150 / 30 day(s)
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant 125 mg cap	2	QL 2 / Rx
aprepitant 40 mg cap	2	QL 2.4 / Rx
aprepitant 80 & 125 mg cap	2	QL 6 / Rx
aprepitant 80 & 125 mg misc	2	QL 6 / Rx
aprepitant 80 mg cap	2	QL 6 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIFUNGALS		
griseofulvin microsize 125 mg/5ml suspension	1	
nystatin 500000 unit tab	1	
terbinafine hcl 250 mg tab	1	
IMIDAZOLES		
ketoconazole 200 mg tab	1	
TRIAZOLES		
fluconazole 10 mg/ml recon susp	1	
fluconazole 100 mg tab	1	
fluconazole 150 mg tab	1	QL 30 / 30 day(s)
fluconazole 200 mg tab	1	
fluconazole 40 mg/ml recon susp	1	
fluconazole 50 mg tab	1	
itraconazole 10 mg/ml solution	2	
itraconazole 100 mg cap	1	
voriconazole 200 mg tab	1	QL 120 / 30 day(s) PA
voriconazole 40 mg/ml recon susp	1	QL 600 / 30 day(s) PA
voriconazole 50 mg tab	1	QL 120 / 30 day(s) PA
ANTIHISTAMINES		
ANTIHISTAMINES - ALKYLAMINES		
aller-chlor 4 mg tab	1	OTC Over the Counter
allergy 4 mg tab	1	OTC Over the Counter
allergy relief 4 mg tab	1	OTC Over the Counter
allergy-time 4 mg tab	1	OTC Over the Counter
chlorhist 4 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
chlorphen 4 mg tab	1	OTC Over the Counter
chlorpheniramine maleate 4 mg tab	1	OTC Over the Counter
cvs allergy relief 4 mg tab	1	OTC Over the Counter
eq chlortabs 4 mg tab	1	OTC Over the Counter
eql allergy 4 mg tab	1	OTC Over the Counter
ft allergy relief 4 mg tab	1	OTC Over the Counter
gnp allergy 4 mg tab	1	OTC Over the Counter
gnp allergy relief 4 mg tab	1	OTC Over the Counter
goodsense allergy relief 4 mg tab	1	OTC Over the Counter
hm allergy relief 4 mg tab	1	OTC Over the Counter
pharbechlor 4 mg tab	1	OTC Over the Counter
qc allergy relief 4 mg tab	1	OTC Over the Counter
qc allergy relief 4-hour 4 mg tab	1	OTC Over the Counter
qc chlor-pheniramine 4 mg tab	1	OTC Over the Counter
ra allergy relief 4 mg tab	1	OTC Over the Counter
ra chlorpheniramine maleate 4 mg tab	1	OTC Over the Counter
sb chlorpheniramine 4 mg tab	1	OTC Over the Counter
sm allergy 4 hour 4 mg tab	1	OTC Over the Counter
wal-finate 4 mg tab	1	OTC Over the Counter
ANTIHISTAMINES - ETHANOLAMINES		
alertab 25 mg tab	1	OTC Over the Counter
alka-seltzer plus allergy 25 mg tab	1	OTC Over the Counter
allergy childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
allergy relief 25 mg tab	1	OTC Over the Counter
allergy relief 25 mg/10ml liquid	1	OTC Over the Counter
allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
anti-hist allergy 25 mg tab	1	OTC Over the Counter
banophen 25 mg tab	1	OTC Over the Counter
carbinoxamine maleate 4 mg tab	1	AL1 At least 6 yrs old
carbinoxamine maleate 4 mg/5ml solution	1	AL1 At least 2 yrs old
complete allergy medicine 25 mg tab	1	OTC Over the Counter
complete allergy relief 25 mg tab	1	OTC Over the Counter
curelief 12.5 mg/5ml liquid	1	OTC Over the Counter
cvs allergy relief 25 mg tab	1	OTC Over the Counter
cvs allergy relief 25 mg/10ml liquid	1	OTC Over the Counter
cvs allergy relief adult 50 mg/20ml liquid	1	OTC Over the Counter
cvs allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
cvs childrens allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
di-phen 12.5 mg/5ml elixir	1	
diphen 25 mg tab	1	OTC Over the Counter
DIPHENHYDRAMINE HCL 12.5 MG/5ML ELIXIR	1	
diphenhydramine hcl 12.5 mg/5ml elixir	1	
diphenhydramine hcl 12.5 mg/5ml liquid	1	OTC Over the Counter
diphenhydramine hcl 25 mg tab	1	OTC Over the Counter
diphenhydramine hcl 25 mg/10ml liquid	1	OTC Over the Counter
DIPHENHYDRAMINE HCL 6.25 MG/ML LIQUID	1	OTC Over the Counter
diphenhydramine hcl childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
eq allergy relief 25 mg tab	1	OTC Over the Counter
eq allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
eql allergy 25 mg tab	1	OTC Over the Counter
eql allergy relief 25 mg tab	1	OTC Over the Counter
eql childrens allergy 12.5 mg/5ml liquid	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ft allergy relief 25 mg tab	1	OTC Over the Counter
ft allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
geri-dryl 12.5 mg/5ml liquid	1	OTC Over the Counter
geri-dryl 25 mg tab	1	OTC Over the Counter
gnp allergy 25 mg tab	1	OTC Over the Counter
gnp allergy antihistamine 12.5 mg/5ml liquid	1	OTC Over the Counter
gnp allergy childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
gnp allergy relief 25 mg tab	1	OTC Over the Counter
gnp allergy relief max st 12.5 mg/5ml liquid	1	OTC Over the Counter
gnp childrens allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
h-e-b childrens allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
hm allergy relief 25 mg tab	1	OTC Over the Counter
hm allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
kindermed kids allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
kls allergy medicine 25 mg tab	1	OTC Over the Counter
liquid allergy relief 12.5 mg/5ml liquid	1	OTC Over the Counter
m-dryl 12.5 mg/5ml liquid	1	OTC Over the Counter
maxallergy kids 12.5 mg/5ml liquid	1	OTC Over the Counter
mm aller-ben 25 mg tab	1	OTC Over the Counter
naramin 12.5 mg/5ml liquid	1	OTC Over the Counter
pediacare childrens allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
px allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
px allergy 25 mg tab	1	OTC Over the Counter
qc allergy childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
qc allergy relief 25 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
qc complete allergy medicine 25 mg tab	1	OTC Over the Counter
ra allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
ra allergy 25 mg tab	1	OTC Over the Counter
ra allergy medication 12.5 mg/5ml liquid	1	OTC Over the Counter
ra allergy medication 25 mg tab	1	OTC Over the Counter
ra allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
ra complete allergy 25 mg tab	1	OTC Over the Counter
ra diphedryl allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
sb allergy medicine 12.5 mg/5ml liquid	1	OTC Over the Counter
sb allergy medicine 25 mg tab	1	OTC Over the Counter
siladryl allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
sm allergy relief 12.5 mg/5ml liquid	1	OTC Over the Counter
sm allergy relief 25 mg tab	1	OTC Over the Counter
sm allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
tgt allergy relief 25 mg tab	1	OTC Over the Counter
tgt allergy relief childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
total allergy 25 mg tab	1	OTC Over the Counter
total allergy medicine 12.5 mg/5ml liquid	1	OTC Over the Counter
wal-dryl allergy 12.5 mg/5ml liquid	1	OTC Over the Counter
wal-dryl allergy 25 mg tab	1	OTC Over the Counter
wal-dryl allergy childrens 12.5 mg/5ml liquid	1	OTC Over the Counter
ANTIHISTAMINES - NON-SEDATING		
12hr allergy relief 60 mg tab	1	OTC Over the Counter
24hr allergy relief 180 mg tab	1	OTC Over the Counter
all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
allegra hives 24hr 180 mg tab	1	OTC Over the Counter
aller-ease 60 mg tab	1	OTC Over the Counter
allergy (cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy 10 mg tab	1	OTC Over the Counter
allergy 24-hr 180 mg tab	1	OTC Over the Counter
allergy 24hour indoor/outdoor 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy childrens 5 mg/5ml solution	1	OTC Over the Counter
allergy rel child (loratadine) 5 mg/5ml solution	1	OTC Over the Counter
allergy relief (cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy relief (loratadine) 10 mg cap	1	OTC Over the Counter
allergy relief (loratadine) 10 mg tab	1	OTC Over the Counter
allergy relief 10 mg tab	1	OTC Over the Counter
allergy relief 180 mg tab	1	OTC Over the Counter
allergy relief 24-hr 10 mg tab	1	OTC Over the Counter
allergy relief 60 mg tab	1	OTC Over the Counter
allergy relief ceterizine 5 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy relief cetirizine 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy relief childrens 5 mg/5ml solution	1	OTC Over the Counter
allergy relief/indoor/outdoor 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
allergy relief/indoor/outdoor 180 mg tab	1	OTC Over the Counter
cetirizine hcl 1 mg/ml solution	1	QL 300 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cetirizine hcl 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
cetirizine hcl 5 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
cetirizine hcl 5 mg/5ml solution	1	QL 300 / 30 day(s)
childrens loratadine 5 mg/5ml solution	1	OTC Over the Counter
CLARITIN ALLERGY CHILDRENS 5 MG/5ML SOLUTION	1	OTC Over the Counter
claritin allergy childrens 5 mg/5ml solution	1	OTC Over the Counter
cvs allerg rel child (lorat) 5 mg/5ml solution	1	OTC Over the Counter
cvs allergy childrens 5 mg/5ml solution	1	OTC Over the Counter
cvs allergy relief 10 mg tab	1	OTC Over the Counter
cvs allergy relief 180 mg tab	1	OTC Over the Counter
cvs allergy relief 60 mg tab	1	OTC Over the Counter
cvs allergy relief(cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
cvs indoor/outdoor allergy rlf 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
desloratadine 5 mg tab	1	QL 30 / 30 day(s)
eq all day allergy relief 10 mg tab	1	OTC Over the Counter
eq allerg relief child (lorat) 5 mg/5ml solution	1	OTC Over the Counter
eq allergy childrens 5 mg/5ml solution	1	OTC Over the Counter
eq allergy relief (cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
eq allergy relief 10 mg tab	1	OTC Over the Counter
eq allergy relief 180 mg tab	1	OTC Over the Counter
eq loratadine 10 mg tab	1	OTC Over the Counter
eql all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eql aller-ease 180 mg tab	1	OTC Over the Counter
eql allergy relief 10 mg tab	1	OTC Over the Counter
eql allergy relief 180 mg tab	1	OTC Over the Counter
fexofenadine hcl 180 mg tab	1	OTC Over the Counter
fexofenadine hcl 60 mg tab	1	OTC Over the Counter
ft all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
ft all day allergy 24 hour 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
ft all day allergy relief 10 mg tab	1	OTC Over the Counter
ft allergy relief 12 hour 60 mg tab	1	OTC Over the Counter
ft allergy relief 180 mg tab	1	OTC Over the Counter
ft allergy relief 24 hour 180 mg tab	1	OTC Over the Counter
ft allergy relief cetirizine 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
ft allergy relief loratadine 10 mg tab	1	OTC Over the Counter
gnp all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
gnp allergy relief 180 mg tab	1	OTC Over the Counter
gnp loratadine 10 mg tab	1	OTC Over the Counter
gnp loratadine 5 mg/5ml solution	1	OTC Over the Counter
gnp loratadine childrens 5 mg/5ml solution	1	OTC Over the Counter
goodsense all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
goodsense aller-ease 180 mg tab	1	OTC Over the Counter
goodsense allergy relief 10 mg cap	1	OTC Over the Counter
goodsense allergy relief 10 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hm all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
hm allergy relief (cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
hm allergy relief 180 mg tab	1	OTC Over the Counter
hm allergy relief 60 mg tab	1	OTC Over the Counter
hm cetirizine hcl 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
hm fexofenadine hcl 180 mg tab	1	OTC Over the Counter
hm fexofenadine hcl 60 mg tab	1	OTC Over the Counter
hm loratadine 10 mg tab	1	OTC Over the Counter
hm loratadine childrens 5 mg/5ml solution	1	OTC Over the Counter
kls aller-fex 180 mg tab	1	OTC Over the Counter
kls aller-tec 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
kls allerclear 10 mg tab	1	OTC Over the Counter
kp fexofenadine hcl 180 mg tab	1	OTC Over the Counter
kp fexofenadine hcl 60 mg tab	1	OTC Over the Counter
kp loratadine 10 mg tab	1	OTC Over the Counter
levocetirizine dihydrochloride 2.5 mg/5ml solution	1	QL 900 / 30 day(s)
levocetirizine dihydrochloride 5 mg tab	1	QL 30 / 30 day(s)
loradamed 10 mg tab	1	OTC Over the Counter
loratadine 10 mg cap	1	OTC Over the Counter
loratadine 10 mg tab	1	OTC Over the Counter
loratadine 5 mg/5ml solution	1	OTC Over the Counter
loratadine childrens 5 mg/5ml solution	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
meijer allergy relief 10 mg tab	1	OTC Over the Counter
meijer loratadine 5 mg/5ml solution	1	OTC Over the Counter
mm cetirizine hcl 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
mm fexofenadine hcl 180 mg tab	1	OTC Over the Counter
px allergy relief 180 mg tab	1	OTC Over the Counter
px allergy relief cetirizine 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
px allergy relief loratadine 10 mg tab	1	OTC Over the Counter
qc all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
qc allergy relief 10 mg cap	1	OTC Over the Counter
qc allergy relief 180 mg tab	1	OTC Over the Counter
qc allergy relief 60 mg tab	1	OTC Over the Counter
qc allergy relief childrens 5 mg/5ml solution	1	OTC Over the Counter
qc cetirizine allergy relief 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
qc fexofenadine hydrochloride 180 mg tab	1	OTC Over the Counter
qc loratadine allergy relief 10 mg tab	1	OTC Over the Counter
ra allergy relief (cetirizine) 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
ra allergy relief (loratadine) 10 mg tab	1	OTC Over the Counter
ra allergy relief 180 mg tab	1	OTC Over the Counter
ra loratadine 10 mg tab	1	OTC Over the Counter
ra loratadine 5 mg/5ml solution	1	OTC Over the Counter
sb allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sb loratadine 10 mg tab	1	OTC Over the Counter
sb loratadine 5 mg/5ml solution	1	OTC Over the Counter
sb loratadine allergy relief 10 mg tab	1	OTC Over the Counter
sm all day allergy 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
sm all day allergy relief 10 mg tab	1	OTC Over the Counter
sm allergy childrens 5 mg/5ml solution	1	OTC Over the Counter
sm allergy relief 60 mg tab	1	OTC Over the Counter
sm childrens loratadine 5 mg/5ml solution	1	OTC Over the Counter
sm fexofenadine hcl 180 mg tab	1	OTC Over the Counter
sm fexofenadine hcl 60 mg tab	1	OTC Over the Counter
sm loratadine 10 mg tab	1	OTC Over the Counter
sm loratadine 5 mg/5ml solution	1	OTC Over the Counter
tgt all day allergy relief 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter
tgt allergy relief 10 mg tab	1	OTC Over the Counter
tgt allergy relief 180 mg tab	1	OTC Over the Counter
tgt loratadine childrens 5 mg/5ml solution	1	OTC Over the Counter
wal-fex 180 mg tab	1	OTC Over the Counter
wal-fex allergy 180 mg tab	1	OTC Over the Counter
wal-fex allergy 60 mg tab	1	OTC Over the Counter
wal-itin 10 mg tab	1	OTC Over the Counter
wal-itin 5 mg/5ml solution	1	OTC Over the Counter
wal-itin childrens 5 mg/5ml solution	1	OTC Over the Counter
wal-zyr 10 mg tab	1	QL 30 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIHISTAMINES - PHENOTHIAZINES		
phenadoz 12.5 mg suppos	2	AL1 At least 2 yrs old
phenadoz 25 mg suppos	2	AL1 At least 2 yrs old
promethazine hcl 12.5 mg suppos	2	AL1 At least 2 yrs old
promethazine hcl 12.5 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 25 mg suppos	2	AL1 At least 2 yrs old
promethazine hcl 25 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 50 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 6.25 mg/5ml solution	1	AL1 At least 2 yrs old
promethegan 12.5 mg suppos	2	AL1 At least 2 yrs old
promethegan 25 mg suppos	2	AL1 At least 2 yrs old
ANTIHISTAMINES - PIPERIDINES		
cyproheptadine hcl 2 mg/5ml syrup	1	AL1 At least 2 yrs old
cyproheptadine hcl 4 mg tab	1	AL1 At least 2 yrs old
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
VASCEPA 0.5 GM CAP	2	QL 120 / 30 day(s)
VASCEPA 1 GM CAP	2	QL 120 / 30 day(s)
BILE ACID SEQUESTRANTS		
cholestyramine 4 gm packet	1	QL 120 / 30 day(s)
cholestyramine 4 gm/dose powder	1	QL 1890 / 30 day(s)
cholestyramine light 4 gm packet	1	QL 120 / 30 day(s)
cholestyramine light 4 gm/dose powder	1	QL 1890 / 30 day(s)
colesevelam hcl 3.75 gm packet	2	QL 30 / 30 day(s)
colesevelam hcl 625 mg tab	1	QL 180 / 30 day(s)
colestipol hcl 1 gm tab	1	QL 480 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
colestipol hcl 5 gm granules	1	QL 180 / 30 day(s)
colestipol hcl 5 gm packet	1	QL 180 / 30 day(s)
prevalite 4 gm packet	1	QL 120 / 30 day(s)
prevalite 4 gm/dose powder	1	QL 1890 / 30 day(s)
FIBRIC ACID DERIVATIVES		
fenofibrate 134 mg cap	1	QL 30 / 30 day(s)
fenofibrate 145 mg tab	1	QL 30 / 30 day(s)
fenofibrate 160 mg tab	1	QL 30 / 30 day(s)
fenofibrate 200 mg cap	1	QL 30 / 30 day(s)
fenofibrate 48 mg tab	1	QL 60 / 30 day(s)
fenofibrate 54 mg tab	1	QL 60 / 30 day(s)
fenofibrate 67 mg cap	1	QL 30 / 30 day(s)
fenofibrate micronized 134 mg cap	1	QL 30 / 30 day(s)
fenofibrate micronized 200 mg cap	1	QL 30 / 30 day(s)
fenofibrate micronized 67 mg cap	1	QL 30 / 30 day(s)
gemfibrozil 600 mg tab	1	QL 60 / 30 day(s)
HMG COA REDUCTASE INHIBITORS		
atorvastatin calcium 10 mg tab	1	ACA Affordable Care Act
atorvastatin calcium 20 mg tab	1	ACA Affordable Care Act
atorvastatin calcium 40 mg tab	1	
atorvastatin calcium 80 mg tab	1	
lovastatin 10 mg tab	1	ACA Affordable Care Act
lovastatin 20 mg tab	1	ACA Affordable Care Act
lovastatin 40 mg tab	1	ACA Affordable Care Act
pravastatin sodium 10 mg tab	1	ACA Affordable Care Act
pravastatin sodium 20 mg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pravastatin sodium 40 mg tab	1	ACA Affordable Care Act
pravastatin sodium 80 mg tab	1	ACA Affordable Care Act
rosuvastatin calcium 10 mg tab	1	ACA Affordable Care Act
rosuvastatin calcium 20 mg tab	1	
rosuvastatin calcium 40 mg tab	1	
rosuvastatin calcium 5 mg tab	1	ACA Affordable Care Act
simvastatin 10 mg tab	1	ACA Affordable Care Act
simvastatin 20 mg tab	1	ACA Affordable Care Act
simvastatin 40 mg tab	1	ACA Affordable Care Act
simvastatin 5 mg tab	1	ACA Affordable Care Act
simvastatin 80 mg tab	1	
INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB		
ezetimibe-simvastatin 10-10 mg tab	1	QL 30 / 30 day(s)
ezetimibe-simvastatin 10-20 mg tab	1	QL 30 / 30 day(s)
ezetimibe-simvastatin 10-40 mg tab	1	QL 30 / 30 day(s)
ezetimibe-simvastatin 10-80 mg tab	1	QL 30 / 30 day(s)
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
ezetimibe 10 mg tab	1	QL 30 / 30 day(s)
NICOTINIC ACID DERIVATIVES		
niacin er (antihyperlipidemic) 1000 mg tab er	1	QL 60 / 30 day(s)
niacin er (antihyperlipidemic) 500 mg tab er	1	QL 90 / 30 day(s)
niacin er (antihyperlipidemic) 750 mg tab er	1	QL 60 / 30 day(s)
PCSK9 INHIBITORS		
REPATHA 140 MG/ML SOLN PRSYR	1	QL 2 / 28 day(s)
REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART	1	QL 3.5 / 30 day(s)
REPATHA SURECLICK 140 MG/ML SOLN A-INJ	1	QL 2 / 28 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIHYPERTENSIVES		
ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS		
amlodipine besy-benazepril hcl 10-20 mg cap	1	
amlodipine besy-benazepril hcl 10-40 mg cap	1	
amlodipine besy-benazepril hcl 2.5-10 mg cap	1	
amlodipine besy-benazepril hcl 5-10 mg cap	1	
amlodipine besy-benazepril hcl 5-20 mg cap	1	
amlodipine besy-benazepril hcl 5-40 mg cap	1	
TRANDOLAPRIL-VERAPAMIL HCL ER 1-240 MG TAB ER	2	
TRANDOLAPRIL-VERAPAMIL HCL ER 2-180 MG TAB ER	2	
trandolapril-verapamil hcl er 2-180 mg tab er	2	
TRANDOLAPRIL-VERAPAMIL HCL ER 2-240 MG TAB ER	2	
trandolapril-verapamil hcl er 2-240 mg tab er	2	
TRANDOLAPRIL-VERAPAMIL HCL ER 4-240 MG TAB ER	2	
trandolapril-verapamil hcl er 4-240 mg tab er	2	
ACE INHIBITORS		
benazepril hcl 10 mg tab	1	
benazepril hcl 20 mg tab	1	
benazepril hcl 40 mg tab	1	
benazepril hcl 5 mg tab	1	
captopril 100 mg tab	1	
captopril 12.5 mg tab	1	
captopril 25 mg tab	1	
captopril 50 mg tab	1	
enalapril maleate 1 mg/ml solution	1	
enalapril maleate 10 mg tab	1	
enalapril maleate 2.5 mg tab	1	
enalapril maleate 20 mg tab	1	
enalapril maleate 5 mg tab	1	
fosinopril sodium 10 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fosinopril sodium 20 mg tab	1	
fosinopril sodium 40 mg tab	1	
lisinopril 10 mg tab	1	
lisinopril 2.5 mg tab	1	
lisinopril 20 mg tab	1	
lisinopril 30 mg tab	1	
lisinopril 40 mg tab	1	
lisinopril 5 mg tab	1	
moexipril hcl 15 mg tab	1	
moexipril hcl 7.5 mg tab	1	
PERINDOPRIL ERBUMINE 2 MG TAB	1	
perindopril erbumine 2 mg tab	1	
perindopril erbumine 4 mg tab	1	
PERINDOPRIL ERBUMINE 8 MG TAB	1	
perindopril erbumine 8 mg tab	1	
QBRELIS 1 MG/ML SOLUTION	2	
quinapril hcl 10 mg tab	1	
quinapril hcl 20 mg tab	1	
quinapril hcl 40 mg tab	1	
quinapril hcl 5 mg tab	1	
ramipril 1.25 mg cap	1	
ramipril 10 mg cap	1	
ramipril 2.5 mg cap	1	
ramipril 5 mg cap	1	
trandolapril 1 mg tab	1	
trandolapril 2 mg tab	1	
trandolapril 4 mg tab	1	
ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE		
benazepril-hydrochlorothiazide 10-12.5 mg tab	1	
benazepril-hydrochlorothiazide 20-12.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
benazepril-hydrochlorothiazide 20-25 mg tab	1	
benazepril-hydrochlorothiazide 5-6.25 mg tab	1	
enalapril-hydrochlorothiazide 10-25 mg tab	1	
enalapril-hydrochlorothiazide 5-12.5 mg tab	1	
fosinopril sodium-hctz 10-12.5 mg tab	1	
fosinopril sodium-hctz 20-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 10-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 20-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 20-25 mg tab	1	
quinapril-hydrochlorothiazide 10-12.5 mg tab	1	
quinapril-hydrochlorothiazide 20-12.5 mg tab	1	
quinapril-hydrochlorothiazide 20-25 mg tab	1	
AGENTS FOR PHEOCHROMOCYTOMA		
phenoxybenzamine hcl 10 mg cap	3	
ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES		
amlodipine-valsartan-hctz 10-160-12.5 mg tab	1	
amlodipine-valsartan-hctz 10-160-25 mg tab	1	
amlodipine-valsartan-hctz 10-320-25 mg tab	1	
amlodipine-valsartan-hctz 5-160-12.5 mg tab	1	
amlodipine-valsartan-hctz 5-160-25 mg tab	1	
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB		
amlodipine besylate-valsartan 10-160 mg tab	1	
amlodipine besylate-valsartan 10-320 mg tab	1	
amlodipine besylate-valsartan 5-160 mg tab	1	
amlodipine besylate-valsartan 5-320 mg tab	1	
amlodipine-olmesartan 10-20 mg tab	1	QL 30 / 30 day(s)
amlodipine-olmesartan 10-40 mg tab	1	QL 30 / 30 day(s)
amlodipine-olmesartan 5-20 mg tab	1	QL 30 / 30 day(s)
amlodipine-olmesartan 5-40 mg tab	1	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TELMISARTAN-AMLODIPINE 40-10 MG TAB	1	QL 30 / 30 day(s)
telmisartan-amlodipine 40-10 mg tab	1	QL 30 / 30 day(s)
TELMISARTAN-AMLODIPINE 40-5 MG TAB	1	QL 30 / 30 day(s)
telmisartan-amlodipine 40-5 mg tab	1	QL 30 / 30 day(s)
TELMISARTAN-AMLODIPINE 80-10 MG TAB	1	QL 30 / 30 day(s)
telmisartan-amlodipine 80-10 mg tab	1	QL 30 / 30 day(s)
TELMISARTAN-AMLODIPINE 80-5 MG TAB	1	QL 30 / 30 day(s)
telmisartan-amlodipine 80-5 mg tab	1	QL 30 / 30 day(s)
ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE		
candesartan cilexetil-hctz 16-12.5 mg tab	1	
candesartan cilexetil-hctz 32-12.5 mg tab	1	
candesartan cilexetil-hctz 32-25 mg tab	1	
irbesartan-hydrochlorothiazide 150-12.5 mg tab	1	
irbesartan-hydrochlorothiazide 300-12.5 mg tab	1	
losartan potassium-hctz 100-12.5 mg tab	1	
losartan potassium-hctz 100-25 mg tab	1	
losartan potassium-hctz 50-12.5 mg tab	1	
olmesartan medoxomil-hctz 20-12.5 mg tab	1	
olmesartan medoxomil-hctz 40-12.5 mg tab	1	
olmesartan medoxomil-hctz 40-25 mg tab	1	
telmisartan-hctz 40-12.5 mg tab	1	
telmisartan-hctz 80-12.5 mg tab	1	
telmisartan-hctz 80-25 mg tab	1	
valsartan-hydrochlorothiazide 160-12.5 mg tab	1	
valsartan-hydrochlorothiazide 160-25 mg tab	1	
valsartan-hydrochlorothiazide 320-12.5 mg tab	1	
valsartan-hydrochlorothiazide 320-25 mg tab	1	
valsartan-hydrochlorothiazide 80-12.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan cilexetil 16 mg tab	1	QL 60 / 30 day(s)
candesartan cilexetil 32 mg tab	1	QL 30 / 30 day(s)
candesartan cilexetil 4 mg tab	1	QL 60 / 30 day(s)
candesartan cilexetil 8 mg tab	1	QL 60 / 30 day(s)
irbesartan 150 mg tab	1	
irbesartan 300 mg tab	1	
irbesartan 75 mg tab	1	
losartan potassium 100 mg tab	1	
losartan potassium 25 mg tab	1	
losartan potassium 50 mg tab	1	
olmesartan medoxomil 20 mg tab	1	
olmesartan medoxomil 40 mg tab	1	
olmesartan medoxomil 5 mg tab	1	
telmisartan 20 mg tab	1	
telmisartan 40 mg tab	1	
telmisartan 80 mg tab	1	
valsartan 160 mg tab	1	
valsartan 320 mg tab	1	
valsartan 40 mg tab	1	
valsartan 80 mg tab	1	
ANTIADRENERGICS - CENTRALLY ACTING		
clonidine 0.1 mg/24hr patch wk	1	
clonidine 0.2 mg/24hr patch wk	1	
clonidine 0.3 mg/24hr patch wk	1	
clonidine hcl 0.1 mg tab	1	
clonidine hcl 0.2 mg tab	1	
clonidine hcl 0.3 mg tab	1	
guanfacine hcl 1 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
guanfacine hcl 2 mg tab	1	
METHYLDOPA 250 MG TAB	1	
methyldopa 250 mg tab	1	
METHYLDOPA 500 MG TAB	1	
methyldopa 500 mg tab	1	
ANTIADRENERGICS - PERIPHERALLY ACTING		
doxazosin mesylate 1 mg tab	1	
doxazosin mesylate 2 mg tab	1	
doxazosin mesylate 4 mg tab	1	
doxazosin mesylate 8 mg tab	1	
prazosin hcl 1 mg cap	1	
prazosin hcl 2 mg cap	1	
prazosin hcl 5 mg cap	1	
terazosin hcl 1 mg cap	1	
terazosin hcl 10 mg cap	1	
terazosin hcl 2 mg cap	1	
terazosin hcl 5 mg cap	1	
ANTIHYPERTENSIVES - MISC.		
VECAMYL 2.5 MG TAB	3	S Specialty Drug
BETA BLOCKER & DIURETIC COMBINATIONS		
atenolol-chlorthalidone 100-25 mg tab	1	
atenolol-chlorthalidone 50-25 mg tab	1	
bisoprolol-hydrochlorothiazide 10-6.25 mg tab	1	
bisoprolol-hydrochlorothiazide 2.5-6.25 mg tab	1	
bisoprolol-hydrochlorothiazide 5-6.25 mg tab	1	
metoprolol-hydrochlorothiazide 100-25 mg tab	1	
metoprolol-hydrochlorothiazide 50-25 mg tab	1	
PROPRANOLOL-HCTZ 40-25 MG TAB	1	
PROPRANOLOL-HCTZ 80-25 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIRECT RENIN INHIBITORS		
aliskiren fumarate 150 mg tab	1	QL 30 / 30 day(s)
aliskiren fumarate 300 mg tab	1	QL 30 / 30 day(s)
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone 25 mg tab	1	
eplerenone 50 mg tab	1	
VASODILATORS		
hydralazine hcl 10 mg tab	1	
hydralazine hcl 100 mg tab	1	
hydralazine hcl 25 mg tab	1	
hydralazine hcl 50 mg tab	1	
minoxidil 10 mg tab	1	
minoxidil 2.5 mg tab	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone-proguanil hcl 250-100 mg tab	2	
atovaquone-proguanil hcl 62.5-25 mg tab	2	
chloroquine phosphate 250 mg tab	2	
chloroquine phosphate 500 mg tab	2	
hydroxychloroquine sulfate 200 mg tab	1	
mefloquine hcl 250 mg tab	2	
primaquine phosphate 26.3 (15 base) mg tab	2	
pyrimethamine 25 mg tab	3	S Specialty Drug
quinine sulfate 324 mg cap	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
pyridostigmine bromide 60 mg tab	1	
pyridostigmine bromide 60 mg/5ml solution	2	
pyridostigmine bromide er 180 mg tab er	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIMYCOBACTERIAL AGENTS		
ethambutol hcl 100 mg tab	1	
ethambutol hcl 400 mg tab	1	
ISONIAZID 100 MG TAB	1	
isoniazid 300 mg tab	1	
PASER 4 GM PACKET	1	
PRIFTIN 150 MG TAB	1	QL 37.5 / 30 day(s)
pyrazinamide 500 mg tab	2	
rifabutin 150 mg cap	2	
rifampin 150 mg cap	1	
rifampin 300 mg cap	1	
TRECATOR 250 MG TAB	2	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
MYLERAN 2 MG TAB	2	S Specialty Drug
ANDROGEN BIOSYNTHESIS INHIBITORS		
abiraterone acetate 250 mg tab	1	QL 120 / 30 day(s) PA S Specialty Drug
abiraterone acetate 500 mg tab	3	QL 60 / 30 day(s) PA S Specialty Drug
YONSA 125 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
ANTIADRENALS		
LYSODREN 500 MG TAB	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIANDROGENS		
bicalutamide 50 mg tab	1	S Specialty Drug
ERLEADA 240 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
ERLEADA 60 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
nilutamide 150 mg tab	2	S Specialty Drug
NUBEQA 300 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
XTANDI 40 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
XTANDI 40 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
XTANDI 80 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
ANTIESTROGENS		
SOLTAMOX 10 MG/5ML SOLUTION	2	ACA Affordable Care Act
tamoxifen citrate 10 mg tab	1	ACA Affordable Care Act
tamoxifen citrate 20 mg tab	1	ACA Affordable Care Act
toremifene citrate 60 mg tab	2	S Specialty Drug
ANTIMETABOLITES		
capecitabine 150 mg tab	1	QL 120 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
capecitabine 500 mg tab	1	QL 120 / 30 day(s) PA S Specialty Drug
mercaptopurine 50 mg tab	1	S Specialty Drug
methotrexate sodium (pf) 1 gm/40ml solution	1	
methotrexate sodium (pf) 250 mg/10ml solution	1	
methotrexate sodium (pf) 50 mg/2ml solution	1	
methotrexate sodium 1 gm recon soln	1	
methotrexate sodium 1000 mg/40ml solution	1	
methotrexate sodium 2.5 mg tab	1	
methotrexate sodium 50 mg/2ml solution	1	
ONUREG 200 MG TAB	3	QL 14 / 28 day(s) PA S Specialty Drug
ONUREG 300 MG TAB	3	QL 14 / 28 day(s) PA S Specialty Drug
TABLOID 40 MG TAB	2	S Specialty Drug
ANTINEOPLASTIC - ALK INHIBITORS		
ALECENSA 150 MG CAP	3	QL 240 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ALUNBRIG 180 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ALUNBRIG 30 MG TAB	3	QL 180 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALUNBRIG 90 & 180 MG TAB THPK	3	PA AL1 At least 18 yrs old S Specialty Drug QLC 30 / 180 day(s)
ALUNBRIG 90 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
LORBRENA 100 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
LORBRENA 25 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
XALKORI 200 MG CAP	3	QL 60 / 30 day(s) PA S Specialty Drug
XALKORI 250 MG CAP	3	QL 60 / 30 day(s) PA S Specialty Drug
ZYKADIA 150 MG TAB	3	QL 90 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA 150 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
TUKYSA 50 MG TAB	3	QL 300 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 10 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
VENCLEXTA 100 MG TAB	3	QL 180 / 30 day(s) PA S Specialty Drug
VENCLEXTA 50 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
VENCLEXTA STARTING PACK 10 & 50 & 100 MG TAB THPK	3	PA S Specialty Drug QLC 42 / 180 day(s)
ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS		
BOSULIF 100 MG CAP	3	QL 90 / 30 days PA S Specialty Drug
BOSULIF 100 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
BOSULIF 400 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
BOSULIF 50 MG CAP	3	QL 30 / 30 days PA S Specialty Drug
BOSULIF 500 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
ICLUSIG 10 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ICLUSIG 15 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
ICLUSIG 30 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
ICLUSIG 45 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
imatinib mesylate 100 mg tab	1	QL 90 / 30 day(s) PA S Specialty Drug
imatinib mesylate 400 mg tab	1	QL 60 / 30 day(s) PA S Specialty Drug
SCEMBLIX 20 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
SCEMBLIX 40 MG TAB	3	QL 300 / 30 day(s) PA S Specialty Drug
SPRYCEL 100 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
SPRYCEL 140 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
SPRYCEL 20 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL 50 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
SPRYCEL 70 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
SPRYCEL 80 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
TASIGNA 150 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
TASIGNA 200 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
TASIGNA 50 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
BRAFTOVI 75 MG CAP	3	QL 180 / 30 day(s) PA S Specialty Drug
TAFINLAR 50 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
TAFINLAR 75 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
ZELBORAF 240 MG TAB	3	QL 240 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - BTK INHIBITORS		
BRUKINSA 80 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
CALQUENCE 100 MG CAP	3	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
IMBRUVICA 140 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
IMBRUVICA 140 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
IMBRUVICA 280 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
IMBRUVICA 420 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
IMBRUVICA 560 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
IMBRUVICA 70 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - EGFR INHIBITORS		
erlotinib hcl 100 mg tab	3	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
erlotinib hcl 150 mg tab	3	QL 30 / 30 day(s) PA S Specialty Drug
erlotinib hcl 25 mg tab	3	QL 60 / 30 day(s) PA S Specialty Drug
gefitinib 250 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
GILOTRIF 20 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
GILOTRIF 30 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
GILOTRIF 40 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
TAGRISSO 40 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
TAGRISSO 80 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
VIZIMPRO 15 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
VIZIMPRO 30 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIZIMPRO 45 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - FGFR KINASE INHIBITORS		
BALVERSA 3 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
BALVERSA 4 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
BALVERSA 5 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
PEMAZYRE 13.5 MG TAB	3	QL 14 / 21 day(s) PA S Specialty Drug
PEMAZYRE 4.5 MG TAB	3	QL 14 / 21 day(s) PA S Specialty Drug
PEMAZYRE 9 MG TAB	3	QL 14 / 21 day(s) PA S Specialty Drug
TRUSELTIQ (100MG DAILY DOSE) 100 MG CAP THPK	3	QL 21 / 28 day(s) PA S Specialty Drug
TRUSELTIQ (125MG DAILY DOSE) 100 & 25 MG CAP THPK	3	QL 42 / 28 day(s) PA S Specialty Drug
TRUSELTIQ (50MG DAILY DOSE) 25 MG CAP THPK	3	QL 42 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUSELTIQ (75MG DAILY DOSE) 25 MG CAP THPK	3	QL 63 / 28 day(s) PA S Specialty Drug
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
DAURISMO 25 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
ERIVEDGE 150 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ODOMZO 200 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS		
WELIREG 40 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS		
FARYDAK 10 MG CAP	3	QL 6 / 21 day(s) PA S Specialty Drug
FARYDAK 15 MG CAP	3	QL 6 / 21 day(s) PA S Specialty Drug
FARYDAK 20 MG CAP	3	QL 6 / 21 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLINZA 100 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
POMALYST 2 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
POMALYST 3 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
POMALYST 4 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
ANTINEOPLASTIC - KRAS INHIBITORS		
LUMAKRAS 120 MG TAB	3	QL 240 / 30 day(s) PA S Specialty Drug
LUMAKRAS 320 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - MEK INHIBITORS		
COTELLIC 20 MG TAB	3	QL 63 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
KOSELUGO 10 MG CAP	3	QL 240 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOSELUGO 25 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
MEKINIST 0.5 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
MEKINIST 2 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
MEKTOVI 15 MG TAB	3	QL 180 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - MET INHIBITORS		
TABRECTA 150 MG TAB	3	QL 112 / 28 day(s) PA S Specialty Drug
TABRECTA 200 MG TAB	3	QL 112 / 28 day(s) PA S Specialty Drug
TEPMETKO 225 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS		
TAZVERIK 200 MG TAB	3	QL 240 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
everolimus 10 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
everolimus 2 mg tab sol	1	QL 60 / 30 day(s) PA S Specialty Drug
everolimus 2.5 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
everolimus 3 mg tab sol	1	QL 90 / 30 day(s) PA S Specialty Drug
everolimus 5 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
everolimus 5 mg tab sol	1	QL 60 / 30 day(s) PA S Specialty Drug
everolimus 7.5 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
CABOMETYX 20 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
CABOMETYX 40 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
CABOMETYX 60 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
CAPRELSA 100 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAPRELSA 300 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT	3	QL 56 / 28 day(s) PA S Specialty Drug
COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT	3	QL 112 / 28 day(s) PA S Specialty Drug
COMETRIQ (60 MG DAILY DOSE) 20 MG KIT	3	QL 84 / 28 day(s) PA S Specialty Drug
FOTIVDA 0.89 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
FOTIVDA 1.34 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
lapatinib ditosylate 250 mg tab	3	QL 180 / 30 day(s) PA S Specialty Drug
NERLYNX 40 MG TAB	3	QL 180 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
pazopanib hcl 200 mg tab	1	QL 120 / 30 days PA S Specialty Drug
QINLOCK 50 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYDAPT 25 MG CAP	3	QL 240 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
sorafenib tosylate 200 mg tab	3	QL 120 / 30 day(s) PA S Specialty Drug
STIVARGA 40 MG TAB	3	QL 84 / 28 day(s) PA S Specialty Drug
sunitinib malate 12.5 mg cap	3	QL 90 / 30 day(s) PA S Specialty Drug
sunitinib malate 25 mg cap	3	QL 30 / 30 day(s) PA S Specialty Drug
sunitinib malate 37.5 mg cap	3	QL 30 / 30 day(s) PA S Specialty Drug
sunitinib malate 50 mg cap	3	QL 30 / 30 day(s) PA S Specialty Drug
TURALIO 125 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
TURALIO 200 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
VOTRIENT 200 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XOSPATA 40 MG TAB	3	QL 90 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
AYVAKIT 200 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
AYVAKIT 25 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
AYVAKIT 300 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
AYVAKIT 50 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - PROTEASOME INHIBITORS		
NINLARO 2.3 MG CAP	3	QL 3 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
NINLARO 3 MG CAP	3	QL 3 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
NINLARO 4 MG CAP	3	QL 3 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - RET INHIBITORS		
GAVRETO 100 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
RETEVMO 40 MG CAP	3	QL 180 / 30 day(s) PA S Specialty Drug
RETEVMO 80 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS		
ROZLYTREK 100 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ROZLYTREK 200 MG CAP	3	QL 90 / 30 day(s) PA S Specialty Drug
VITRAKVI 100 MG CAP	3	QL 60 / 30 day(s) PA S Specialty Drug
VITRAKVI 20 MG/ML SOLUTION	3	QL 300 / 30 day(s) PA S Specialty Drug
VITRAKVI 25 MG CAP	3	QL 180 / 30 day(s) PA S Specialty Drug
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK	3	QL 20 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	3	QL 8 / 28 day(s) PA S Specialty Drug
XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK	3	QL 8 / 28 day(s) PA S Specialty Drug
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	3	QL 4 / 28 day(s) PA S Specialty Drug
XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK	3	QL 16 / 28 day(s) PA S Specialty Drug
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	3	QL 8 / 28 day(s) PA S Specialty Drug
XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK	3	QL 12 / 28 day(s) PA S Specialty Drug
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	3	QL 4 / 28 day(s) PA S Specialty Drug
XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK	3	QL 24 / 28 day(s) PA S Specialty Drug
XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK	3	QL 16 / 28 day(s) PA S Specialty Drug
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	3	QL 8 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK	3	QL 32 / 28 day(s) PA S Specialty Drug
ANTINEOPLASTIC COMBINATIONS		
INQOVI 35-100 MG TAB	3	QL 5 / 28 day(s) PA S Specialty Drug
KISQALI FEMARA (400 MG DOSE) 200 & 2.5 MG TAB THPK	3	QL 70 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
KISQALI FEMARA (600 MG DOSE) 200 & 2.5 MG TAB THPK	3	QL 91 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
KISQALI FEMARA(200 MG DOSE) 200 & 2.5 MG TAB THPK	3	QL 49 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
LONSURF 15-6.14 MG TAB	3	QL 100 / 28 day(s) PA S Specialty Drug
LONSURF 20-8.19 MG TAB	3	QL 80 / 28 day(s) PA S Specialty Drug
ANTINEOPLASTICS MISC.		
BESREMI 500 MCG/ML SOLN PRSYR	3	QL 2 / 28 day(s) PA S Specialty Drug
hydroxyurea 500 mg cap	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTRON A 10000000 UNIT RECON SOLN	2	S Specialty Drug
INTRON A 10000000 UNIT/ML SOLUTION	2	S Specialty Drug
INTRON A 18000000 UNIT RECON SOLN	2	S Specialty Drug
INTRON A 50000000 UNIT RECON SOLN	2	S Specialty Drug
INTRON A 6000000 UNIT/ML SOLUTION	2	S Specialty Drug
MATULANE 50 MG CAP	3	PA S Specialty Drug
SYLATRON 200 MCG KIT	3	PA S Specialty Drug
SYLATRON 300 MCG KIT	3	PA S Specialty Drug
SYLATRON 600 MCG KIT	3	PA S Specialty Drug
AROMATASE INHIBITORS		
anastrozole 1 mg tab	1	ACA Affordable Care Act
exemestane 25 mg tab	1	
letrozole 2.5 mg tab	1	ACA Affordable Care Act
CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS		
IBRANCE 100 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
IBRANCE 100 MG TAB	3	QL 21 / 28 day(s) PA S Specialty Drug
IBRANCE 125 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
IBRANCE 125 MG TAB	3	QL 21 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IBRANCE 75 MG CAP	3	QL 21 / 28 day(s) PA S Specialty Drug
IBRANCE 75 MG TAB	3	QL 21 / 28 day(s) PA S Specialty Drug
KISQALI (200 MG DOSE) 200 MG TAB THPK	3	QL 21 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
KISQALI (400 MG DOSE) 200 MG TAB THPK	3	QL 42 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
KISQALI (600 MG DOSE) 200 MG TAB THPK	3	QL 63 / 28 day(s) PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 100 MG TAB	3	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 150 MG TAB	3	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 200 MG TAB	3	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESTROGENS-ANTINEOPLASTIC		
EMCYT 140 MG CAP	3	S Specialty Drug
FOLIC ACID ANTAGONISTS RESCUE AGENTS		
leucovorin calcium 10 mg tab	1	
leucovorin calcium 15 mg tab	1	
leucovorin calcium 25 mg tab	1	
leucovorin calcium 5 mg tab	1	
GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS		
ORGOVYX 120 MG TAB	3	QL 32 / 30 day(s) PA S Specialty Drug
IMIDAZOTETRAZINES		
temozolomide 100 mg cap	1	PA S Specialty Drug
temozolomide 140 mg cap	1	PA S Specialty Drug
temozolomide 180 mg cap	1	PA S Specialty Drug
temozolomide 20 mg cap	1	PA S Specialty Drug
temozolomide 250 mg cap	1	PA S Specialty Drug
temozolomide 5 mg cap	1	PA S Specialty Drug
ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS		
TIBSOVO 250 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS		
IDHIFA 100 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
IDHIFA 50 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
JANUS ASSOCIATED KINASE (JAK) INHIBITORS		
INREBIC 100 MG CAP	3	QL 120 / 30 day(s) PA S Specialty Drug
JAKAFI 10 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
JAKAFI 15 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
JAKAFI 20 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
JAKAFI 25 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
JAKAFI 5 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
LHRH ANALOGS		
ELIGARD 22.5 MG KIT	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELIGARD 30 MG KIT	3	PA S Specialty Drug
ELIGARD 45 MG KIT	3	PA S Specialty Drug
ELIGARD 7.5 MG KIT	3	PA S Specialty Drug
leuprolide acetate 1 mg/0.2ml kit	1	PA S Specialty Drug
LUPRON DEPOT (1-MONTH) 3.75 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT (1-MONTH) 7.5 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT (3-MONTH) 11.25 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT (3-MONTH) 22.5 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT (4-MONTH) 30 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT (6-MONTH) 45 MG KIT	2	PA S Specialty Drug
MITOTIC INHIBITORS		
ETOPOSIDE 50 MG CAP	3	S Specialty Drug
NITROGEN MUSTARDS AND RELATED ANALOGUES		
cyclophosphamide 25 mg cap	1	S Specialty Drug
CYCLOPHOSPHAMIDE 25 MG TAB	2	S Specialty Drug
cyclophosphamide 50 mg cap	1	S Specialty Drug
CYCLOPHOSPHAMIDE 50 MG TAB	2	S Specialty Drug
LEUKERAN 2 MG TAB	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MELPHALAN 2 MG TAB	1	S Specialty Drug
NITROSOUREAS		
GLEOSTINE 10 MG CAP	2	S Specialty Drug
GLEOSTINE 100 MG CAP	2	S Specialty Drug
GLEOSTINE 40 MG CAP	2	S Specialty Drug
PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
COPIKTRA 15 MG CAP	3	QL 56 / 28 day(s) PA S Specialty Drug
COPIKTRA 25 MG CAP	3	QL 56 / 28 day(s) PA S Specialty Drug
PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK	3	QL 28 / 28 day(s) PA S Specialty Drug
PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
ZYDELIG 100 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
ZYDELIG 150 MG TAB	3	QL 60 / 30 day(s) PA S Specialty Drug
POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
LYNPARZA 100 MG TAB	3	QL 120 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYNPARZA 150 MG TAB	3	QL 120 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
RUBRACA 200 MG TAB	3	QL 120 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
RUBRACA 250 MG TAB	3	QL 120 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
RUBRACA 300 MG TAB	3	QL 120 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
TALZENNA 0.1 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
TALZENNA 0.25 MG CAP	3	QL 90 / 30 day(s) PA S Specialty Drug
TALZENNA 0.35 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
TALZENNA 0.5 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
TALZENNA 0.75 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALZENNA 1 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ZEJULA 100 MG CAP	3	QL 90 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ZEJULA 100 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ZEJULA 200 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ZEJULA 300 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
PROGESTINS-ANTINEOPLASTIC		
megestrol acetate 20 mg tab	1	
megestrol acetate 40 mg tab	1	
megestrol acetate 40 mg/ml suspension	1	
megestrol acetate 400 mg/10ml suspension	1	
megestrol acetate 800 mg/20ml suspension	1	
RETINOIDS		
tretinoin 10 mg cap	1	QL 90 / 365 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE RETINOID X RECEPTOR AGONISTS		
bexarotene 75 mg cap	3	PA S Specialty Drug
TOPOISOMERASE I INHIBITORS		
HYCAMTIN 0.25 MG CAP	3	PA S Specialty Drug
HYCAMTIN 1 MG CAP	3	PA S Specialty Drug
URINARY TRACT PROTECTIVE AGENTS		
MESNEX 400 MG TAB	2	
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS		
INLYTA 1 MG TAB	3	QL 180 / 30 day(s) PA S Specialty Drug
INLYTA 5 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK	3	QL 30 / 30 day(s) PA S Specialty Drug
LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK	3	QL 90 / 30 day(s) PA S Specialty Drug
LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK	3	QL 60 / 30 day(s) PA S Specialty Drug
LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK	3	QL 90 / 30 day(s) PA S Specialty Drug
LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK	3	QL 60 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK	3	QL 90 / 30 day(s) PA S Specialty Drug
LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK	3	QL 30 / 30 day(s) PA S Specialty Drug
LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK	3	QL 60 / 30 day(s) PA S Specialty Drug
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ANTICHOLINERGICS		
benztropine mesylate 0.5 mg tab	1	
benztropine mesylate 1 mg tab	1	
benztropine mesylate 2 mg tab	1	
TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION	1	
trihexyphenidyl hcl 0.4 mg/ml solution	1	
trihexyphenidyl hcl 2 mg tab	1	
trihexyphenidyl hcl 5 mg tab	1	
ANTIPARKINSON DOPAMINERGICS		
amantadine hcl 100 mg cap	1	
amantadine hcl 100 mg tab	1	
amantadine hcl 50 mg/5ml solution	1	
bromocriptine mesylate 2.5 mg tab	1	
bromocriptine mesylate 5 mg cap	1	
INBRIJA 42 MG CAP	1	S Specialty Drug
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
rasagiline mesylate 0.5 mg tab	2	
rasagiline mesylate 1 mg tab	2	
selegiline hcl 5 mg cap	1	
selegiline hcl 5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CENTRAL/PERIPHERAL COMT INHIBITORS		
tolcapone 100 mg tab	2	
DECARBOXYLASE INHIBITORS		
carbidopa 25 mg tab	1	
LEVODOPA COMBINATIONS		
carbidopa-levodopa 10-100 mg tab	1	
CARBIDOPA-LEVODOPA 10-100 MG TAB DISP	1	
carbidopa-levodopa 25-100 mg tab	1	
CARBIDOPA-LEVODOPA 25-100 MG TAB DISP	1	
carbidopa-levodopa 25-100 mg tab disp	1	
carbidopa-levodopa 25-250 mg tab	1	
CARBIDOPA-LEVODOPA 25-250 MG TAB DISP	1	
carbidopa-levodopa er 25-100 mg tab er	1	
carbidopa-levodopa er 50-200 mg tab er	1	
carbidopa-levodopa-entacapone 12.5-50-200 mg tab	2	
carbidopa-levodopa-entacapone 18.75-75-200 mg tab	2	
carbidopa-levodopa-entacapone 25-100-200 mg tab	2	
carbidopa-levodopa-entacapone 31.25-125-200 mg tab	2	
carbidopa-levodopa-entacapone 37.5-150-200 mg tab	2	
carbidopa-levodopa-entacapone 50-200-200 mg tab	2	
RYTARY 23.75-95 MG CAP ER	2	
RYTARY 36.25-145 MG CAP ER	2	
RYTARY 48.75-195 MG CAP ER	2	
RYTARY 61.25-245 MG CAP ER	2	
NONERGOLINE DOPAMINE RECEPTOR AGONISTS		
KYNMOBI 10 MG FILM	1	S Specialty Drug
KYNMOBI 15 MG FILM	1	S Specialty Drug
KYNMOBI 20 MG FILM	1	S Specialty Drug
KYNMOBI 25 MG FILM	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KYNMOBI 30 MG FILM	1	S Specialty Drug
NEUPRO 1 MG/24HR PATCH 24HR	2	
NEUPRO 2 MG/24HR PATCH 24HR	2	
NEUPRO 3 MG/24HR PATCH 24HR	2	
NEUPRO 4 MG/24HR PATCH 24HR	2	
NEUPRO 6 MG/24HR PATCH 24HR	2	
NEUPRO 8 MG/24HR PATCH 24HR	2	
pramipexole dihydrochloride 0.125 mg tab	1	
pramipexole dihydrochloride 0.25 mg tab	1	
pramipexole dihydrochloride 0.5 mg tab	1	
pramipexole dihydrochloride 0.75 mg tab	1	
pramipexole dihydrochloride 1 mg tab	1	
pramipexole dihydrochloride 1.5 mg tab	1	
pramipexole dihydrochloride er 0.375 mg tab er 24h	2	
pramipexole dihydrochloride er 0.75 mg tab er 24h	2	
pramipexole dihydrochloride er 1.5 mg tab er 24h	2	
pramipexole dihydrochloride er 2.25 mg tab er 24h	2	
pramipexole dihydrochloride er 3 mg tab er 24h	2	
pramipexole dihydrochloride er 3.75 mg tab er 24h	2	
pramipexole dihydrochloride er 4.5 mg tab er 24h	2	
ropinirole hcl 0.25 mg tab	1	
ropinirole hcl 0.5 mg tab	1	
ropinirole hcl 1 mg tab	1	
ropinirole hcl 2 mg tab	1	
ropinirole hcl 3 mg tab	1	
ropinirole hcl 4 mg tab	1	
ropinirole hcl 5 mg tab	1	
ropinirole hcl er 12 mg tab er 24h	2	
ropinirole hcl er 2 mg tab er 24h	2	
ropinirole hcl er 4 mg tab er 24h	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ropinirole hcl er 6 mg tab er 24h	2	
ropinirole hcl er 8 mg tab er 24h	2	
PERIPHERAL COMT INHIBITORS		
entacapone 200 mg tab	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
LITHIUM 8 MEQ/5ML SOLUTION	2	
lithium 8 meq/5ml solution	2	
lithium carbonate 150 mg cap	1	
LITHIUM CARBONATE 300 MG CAP	1	
lithium carbonate 300 mg cap	1	
lithium carbonate 300 mg tab	1	
lithium carbonate 600 mg cap	1	
lithium carbonate er 300 mg tab er	1	
lithium carbonate er 450 mg tab er	1	
ANTIPSYCHOTICS - MISC.		
lurasidone hcl 120 mg tab	1	QL 30 / 30 day(s) AL1 At least 10 yrs old
lurasidone hcl 20 mg tab	1	QL 30 / 30 day(s) AL1 At least 10 yrs old
lurasidone hcl 40 mg tab	1	QL 30 / 30 day(s) AL1 At least 10 yrs old
lurasidone hcl 60 mg tab	1	QL 30 / 30 day(s) AL1 At least 10 yrs old
lurasidone hcl 80 mg tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
ziprasidone hcl 20 mg cap	1	QL 60 / 30 day(s) AL1 At least 7 yrs old
ziprasidone hcl 40 mg cap	1	QL 60 / 30 day(s) AL1 At least 7 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ziprasidone hcl 60 mg cap	1	QL 60 / 30 day(s) AL1 At least 7 yrs old
ziprasidone hcl 80 mg cap	1	QL 60 / 30 day(s) AL1 At least 7 yrs old
BENZISOXAZOLES		
paliperidone er 1.5 mg tab er 24h	2	QL 30 / 30 day(s) AL1 At least 12 yrs old
paliperidone er 3 mg tab er 24h	2	QL 30 / 30 day(s) AL1 At least 12 yrs old
paliperidone er 6 mg tab er 24h	2	QL 60 / 30 day(s) AL1 At least 12 yrs old
paliperidone er 9 mg tab er 24h	2	QL 30 / 30 day(s) AL1 At least 12 yrs old
risperidone 0.25 mg tab	1	QL 60 / 30 day(s)
risperidone 0.5 mg tab	1	QL 60 / 30 day(s)
risperidone 0.5 mg tab disp	1	QL 60 / 30 day(s)
risperidone 1 mg tab	1	QL 60 / 30 day(s)
risperidone 1 mg tab disp	1	QL 60 / 30 day(s)
risperidone 1 mg/ml solution	1	QL 480 / 30 day(s)
risperidone 2 mg tab	1	QL 60 / 30 day(s)
risperidone 2 mg tab disp	1	QL 60 / 30 day(s)
risperidone 3 mg tab	1	QL 60 / 30 day(s)
risperidone 3 mg tab disp	1	QL 60 / 30 day(s)
risperidone 4 mg tab	1	QL 120 / 30 day(s)
risperidone 4 mg tab disp	1	QL 120 / 30 day(s)
BUTYROPHENONES		
haloperidol 0.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
haloperidol 1 mg tab	1	
haloperidol 10 mg tab	1	
haloperidol 2 mg tab	1	
haloperidol 20 mg tab	1	
haloperidol 5 mg tab	1	
haloperidol lactate 2 mg/ml conc	1	
DIBENZO-OXEPINO PYRROLES		
asenapine maleate 10 mg sl tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
asenapine maleate 2.5 mg sl tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
asenapine maleate 5 mg sl tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
DIBENZODIAZEPINES		
clozapine 100 mg tab	1	QL 270 / 30 day(s) AL1 At least 18 yrs old
clozapine 200 mg tab	1	QL 120 / 30 day(s) AL1 At least 18 yrs old
clozapine 25 mg tab	1	QL 90 / 30 day(s) AL1 At least 18 yrs old
clozapine 50 mg tab	1	QL 90 / 30 day(s) AL1 At least 18 yrs old
DIBENZOTHIAZEPINES		
quetiapine fumarate 100 mg tab	1	QL 90 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate 200 mg tab	1	QL 90 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate 25 mg tab	1	QL 90 / 30 day(s) AL1 At least 10 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quetiapine fumarate 300 mg tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate 400 mg tab	1	QL 60 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate 50 mg tab	1	QL 90 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate er 150 mg tab er 24h	2	QL 30 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate er 200 mg tab er 24h	2	QL 30 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate er 300 mg tab er 24h	2	QL 60 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate er 400 mg tab er 24h	2	QL 60 / 30 day(s) AL1 At least 10 yrs old
quetiapine fumarate er 50 mg tab er 24h	2	QL 60 / 30 day(s) AL1 At least 10 yrs old
DIBENZOXAZEPINES		
loxapine succinate 10 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 25 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 5 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 50 mg cap	1	AL1 At least 18 yrs old
PHENOTHIAZINES		
chlorpromazine hcl 10 mg tab	1	
chlorpromazine hcl 100 mg tab	1	
chlorpromazine hcl 200 mg tab	1	
chlorpromazine hcl 25 mg tab	1	
chlorpromazine hcl 50 mg tab	1	
compro 25 mg suppos	2	
fluphenazine hcl 1 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluphenazine hcl 10 mg tab	1	
fluphenazine hcl 2.5 mg tab	1	
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR	2	
fluphenazine hcl 5 mg tab	1	
FLUPHENAZINE HCL 5 MG/ML CONC	2	
perphenazine 16 mg tab	1	AL1 At least 12 yrs old
perphenazine 2 mg tab	1	AL1 At least 12 yrs old
perphenazine 4 mg tab	1	AL1 At least 12 yrs old
perphenazine 8 mg tab	1	AL1 At least 12 yrs old
prochlorperazine 25 mg suppos	2	
prochlorperazine maleate 10 mg tab	1	
prochlorperazine maleate 5 mg tab	1	
trifluoperazine hcl 1 mg tab	1	
trifluoperazine hcl 10 mg tab	1	
trifluoperazine hcl 2 mg tab	1	
trifluoperazine hcl 5 mg tab	1	
QUINOLINONE DERIVATIVES		
aripiprazole 1 mg/ml solution	2	QL 900 / 30 day(s) AL1 At least 6 yrs old
aripiprazole 10 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old
aripiprazole 15 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old
aripiprazole 2 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old
aripiprazole 20 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old
aripiprazole 30 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aripiprazole 5 mg tab	1	QL 30 / 30 day(s) AL1 At least 6 yrs old
ARISTADA 1064 MG/3.9ML PRSYR	2	QL 3.9 / 56 day(s) ST AL1 At least 18 yrs old
ARISTADA 441 MG/1.6ML PRSYR	2	QL 1.6 / 30 day(s) ST AL1 At least 18 yrs old
ARISTADA 662 MG/2.4ML PRSYR	2	QL 2.4 / 28 day(s) ST AL1 At least 18 yrs old
ARISTADA 882 MG/3.2ML PRSYR	2	QL 3.2 / 28 day(s) ST AL1 At least 18 yrs old
ARISTADA INITIO 675 MG/2.4ML PRSYR	2	ST AL1 At least 18 yrs old QLC 2.4 / 180 day(s)
THIENBENZODIAZEPINES		
olanzapine 10 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 10 mg tab disp	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 15 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 15 mg tab disp	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 2.5 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 20 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olanzapine 20 mg tab disp	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 5 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 5 mg tab disp	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
olanzapine 7.5 mg tab	1	QL 30 / 30 day(s) AL1 At least 7 yrs old
THIOXANTHENES		
thiothixene 1 mg cap	1	
thiothixene 10 mg cap	1	
thiothixene 2 mg cap	1	
thiothixene 5 mg cap	1	
ANTISEPTICS & DISINFECTANTS		
CHLORINE ANTISEPTICS		
betasept surgical scrub 4 % solution	1	OTC Over the Counter
CHLORHEXIDINE GLUCONATE 2 % LIQUID	1	OTC Over the Counter
chlorhexidine gluconate 4 % solution	1	OTC Over the Counter
ANTIVIRALS		
ANTIRETROVIRAL COMBINATIONS		
abacavir sulfate-lamivudine 600-300 mg tab	1	QL 30 / 30 day(s)
abacavir-lamivudine-zidovudine 300-150-300 mg tab	1	QL 60 / 30 day(s)
BIKTARVY 30-120-15 MG TAB	1	QL 30 / 30 day(s)
BIKTARVY 50-200-25 MG TAB	1	QL 30 / 30 day(s)
CIMDUO 300-300 MG TAB	2	QL 30 / 30 day(s)
DELSTRIGO 100-300-300 MG TAB	2	QL 30 / 30 day(s)
DESCOVY 200-25 MG TAB	1	QL 30 / 30 day(s)
DOVATO 50-300 MG TAB	2	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
efavirenz-emtricitab-tenofo df 600-200-300 mg tab	2	QL 30 / 30 day(s)
efavirenz-lamivudine-tenofovir 400-300-300 mg tab	2	QL 30 / 30 day(s)
efavirenz-lamivudine-tenofovir 600-300-300 mg tab	2	QL 30 / 30 day(s)
emtricitabine-tenofovir df 100-150 mg tab	1	QL 30 / 30 day(s)
emtricitabine-tenofovir df 133-200 mg tab	1	QL 30 / 30 day(s)
emtricitabine-tenofovir df 167-250 mg tab	1	QL 30 / 30 day(s)
emtricitabine-tenofovir df 200-300 mg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
EVOTAZ 300-150 MG TAB	2	QL 30 / 30 day(s)
GENVOYA 150-150-200-10 MG TAB	1	QL 30 / 30 day(s)
JULUCA 50-25 MG TAB	2	QL 30 / 30 day(s)
lamivudine-zidovudine 150-300 mg tab	1	QL 60 / 30 day(s)
lopinavir-ritonavir 100-25 mg tab	1	QL 180 / 30 day(s)
lopinavir-ritonavir 200-50 mg tab	1	QL 120 / 30 day(s)
lopinavir-ritonavir 400-100 mg/5ml solution	1	QL 480 / 30 day(s)
ODEFSEY 200-25-25 MG TAB	2	QL 30 / 30 day(s)
PREZCOBIX 800-150 MG TAB	2	QL 30 / 30 day(s)
SYMTUZA 800-150-200-10 MG TAB	2	QL 30 / 30 day(s)
TEMIXYS 300-300 MG TAB	2	QL 30 / 30 day(s)
TRIUMEQ 600-50-300 MG TAB	1	QL 30 / 30 day(s)
ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)		
maraviroc 150 mg tab	1	QL 60 / 30 day(s)
maraviroc 300 mg tab	1	QL 120 / 30 day(s)
ANTIRETROVIRALS - INTEGRASE INHIBITORS		
ISENTRESS 100 MG CHEW TAB	2	QL 180 / 30 day(s)
ISENTRESS 100 MG PACKET	2	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ISENTRESS 25 MG CHEW TAB	2	QL 180 / 30 day(s)
ISENTRESS 400 MG TAB	2	QL 60 / 30 day(s)
ISENTRESS HD 600 MG TAB	2	QL 60 / 30 day(s)
TIVICAY 10 MG TAB	1	QL 60 / 30 day(s)
TIVICAY 25 MG TAB	1	QL 60 / 30 day(s)
TIVICAY 50 MG TAB	1	QL 60 / 30 day(s)
TIVICAY PD 5 MG TAB SOL	1	QL 360 / 30 day(s)
ANTIRETROVIRALS - PROTEASE INHIBITORS		
atazanavir sulfate 150 mg cap	1	QL 30 / 30 day(s)
atazanavir sulfate 200 mg cap	1	QL 60 / 30 day(s)
atazanavir sulfate 300 mg cap	1	QL 30 / 30 day(s)
darunavir 600 mg tab	1	QL 60 / 30 day(s)
darunavir 800 mg tab	1	QL 30 / 30 day(s)
fosamprenavir calcium 700 mg tab	1	QL 120 / 30 day(s)
LEXIVA 50 MG/ML SUSPENSION	2	QL 1800 / 30 day(s)
NORVIR 80 MG/ML SOLUTION	2	QL 480 / 30 day(s)
PREZISTA 100 MG/ML SUSPENSION	2	QL 400 / 30 day(s)
PREZISTA 150 MG TAB	2	QL 180 / 30 day(s)
PREZISTA 75 MG TAB	2	QL 300 / 30 day(s)
ritonavir 100 mg tab	1	QL 360 / 30 day(s)
ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES		
EDURANT 25 MG TAB	2	QL 30 / 30 day(s)
EFAVIRENZ 200 MG CAP	2	QL 60 / 30 day(s)
EFAVIRENZ 50 MG CAP	2	QL 90 / 30 day(s)
efavirenz 600 mg tab	2	QL 30 / 30 day(s)
etravirine 100 mg tab	1	QL 60 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
etravirine 200 mg tab	1	QL 60 / 30 day(s)
INTELENCE 25 MG TAB	2	QL 120 / 30 day(s)
nevirapine 200 mg tab	1	QL 60 / 30 day(s)
NEVIRAPINE 50 MG/5ML SUSPENSION	1	QL 1200 / 30 day(s)
nevirapine er 400 mg tab er 24h	1	QL 30 / 30 day(s)
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES		
abacavir sulfate 20 mg/ml solution	1	QL 960 / 30 day(s)
abacavir sulfate 300 mg tab	1	QL 60 / 30 day(s)
VIDEX 2 GM RECON SOLN	2	QL 1200 / 30 day(s)
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES		
emtricitabine 200 mg cap	1	QL 30 / 30 day(s)
EMTRIVA 10 MG/ML SOLUTION	2	QL 680 / 28 day(s)
lamivudine 10 mg/ml solution	1	QL 960 / 30 day(s)
lamivudine 150 mg tab	1	QL 60 / 30 day(s)
lamivudine 300 mg tab	1	QL 30 / 30 day(s)
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES		
stavudine 15 mg cap	1	QL 60 / 30 day(s)
stavudine 20 mg cap	1	QL 60 / 30 day(s)
stavudine 30 mg cap	1	QL 60 / 30 day(s)
stavudine 40 mg cap	1	QL 60 / 30 day(s)
zidovudine 100 mg cap	1	QL 180 / 30 day(s)
zidovudine 300 mg tab	1	QL 60 / 30 day(s)
zidovudine 50 mg/5ml syrup	1	QL 1920 / 30 day(s)
ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES		
tenofovir disoproxil fumarate 300 mg tab	1	QL 30 / 30 day(s)
VIREAD 150 MG TAB	2	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIREAD 200 MG TAB	2	QL 30 / 30 day(s)
VIREAD 250 MG TAB	2	QL 30 / 30 day(s)
VIREAD 40 MG/GM POWDER	2	QL 240 / 30 day(s)
ANTIVIRAL COMBINATIONS		
PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK	1	AL1 At least 12 yrs old QLC 20 / 30 day(s)
PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK	1	AL1 At least 12 yrs old QLC 30 / 30 day(s)
CMV AGENTS		
valganciclovir hcl 450 mg tab	2	QL 120 / 30 day(s)
valganciclovir hcl 50 mg/ml recon soln	2	
HEPATITIS B AGENTS		
adefovir dipivoxil 10 mg tab	1	QL 30 / 30 day(s)
BARACLUDE 0.05 MG/ML SOLUTION	2	QL 600 / 30 day(s)
entecavir 0.5 mg tab	1	QL 30 / 30 day(s)
entecavir 1 mg tab	1	QL 30 / 30 day(s)
EPIVIR HBV 5 MG/ML SOLUTION	2	
lamivudine 100 mg tab	1	
VEMLIDY 25 MG TAB	1	QL 30 / 30 day(s) AL1 At least 18 yrs old
HEPATITIS C AGENT - COMBINATIONS		
EPCLUSA 150-37.5 MG PACKET	1	QL 28 / 28 day(s) PA AL1 At least 3 yrs old S Specialty Drug
EPCLUSA 200-50 MG PACKET	1	QL 28 / 28 day(s) PA AL1 At least 3 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPCLUSA 200-50 MG TAB	1	QL 28 / 28 day(s) PA S Specialty Drug
EPCLUSA 400-100 MG TAB	1	QL 28 / 28 day(s) PA S Specialty Drug
HARVONI 33.75-150 MG PACKET	1	QL 30 / 30 day(s) PA S Specialty Drug
HARVONI 45-200 MG PACKET	1	QL 30 / 30 day(s) PA S Specialty Drug
HARVONI 45-200 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
HARVONI 90-400 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
MAVYRET 100-40 MG TAB	1	QL 90 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
MAVYRET 50-20 MG PACKET	1	QL 140 / 28 day(s) PA AL1 At least 3 yrs old S Specialty Drug
VOSEVI 400-100-100 MG TAB	3	QL 30 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEPATITIS C AGENTS		
PEGASYS 180 MCG/0.5ML SOLN PRSYR	2	PA S Specialty Drug
PEGASYS 180 MCG/ML SOLUTION	2	PA S Specialty Drug
PEGASYS PROCLICK 180 MCG/0.5ML SOLN A-INJ	2	PA S Specialty Drug
RIBAVIRIN 200 MG CAP	1	QL 180 / 30 day(s) S Specialty Drug
ribavirin 200 mg cap	1	QL 180 / 30 day(s) S Specialty Drug
RIBAVIRIN 200 MG TAB	1	QL 180 / 30 day(s) S Specialty Drug
ribavirin 200 mg tab	1	QL 180 / 30 day(s) S Specialty Drug
SOVALDI 150 MG PACKET	3	QL 30 / 30 day(s) PA S Specialty Drug
SOVALDI 200 MG PACKET	3	QL 30 / 30 day(s) PA S Specialty Drug
SOVALDI 200 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
SOVALDI 400 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
HERPES AGENTS - PURINE ANALOGUES		
acyclovir 200 mg cap	1	
acyclovir 200 mg/5ml suspension	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
acyclovir 400 mg tab	1	
acyclovir 800 mg tab	1	
valacyclovir hcl 1 gm tab	1	
valacyclovir hcl 500 mg tab	1	
HERPES AGENTS - THYMIDINE ANALOGUES		
famciclovir 125 mg tab	1	
famciclovir 250 mg tab	1	
famciclovir 500 mg tab	1	
MISC. ANTIVIRALS		
LAGEVRIO 200 MG CAP	1	AL1 At least 18 yrs old QLC 40 / 30 day(s)
NEURAMINIDASE INHIBITORS		
oseltamivir phosphate 30 mg cap	1	QLC 40 / 120 day(s)
oseltamivir phosphate 45 mg cap	1	QLC 20 / 120 day(s)
oseltamivir phosphate 6 mg/ml recon susp	1	QLC 300 / 120 day(s)
oseltamivir phosphate 75 mg cap	1	QLC 20 / 120 day(s)
RELENZA DISKHALER 5 MG/ACT AER POW BA	2	QLC 40 / 120 day(s)
PA ENDONUCLEASE INHIBITORS		
XOFLUZA (40 MG DOSE) 1 X 40 MG TAB THPK	2	QLC 2 / 120 day(s)
XOFLUZA (40 MG DOSE) 2 X 20 MG TAB THPK	2	QLC 4 / 120 day(s)
XOFLUZA (80 MG DOSE) 1 X 80 MG TAB THPK	2	QLC 2 / 120 day(s)
XOFLUZA (80 MG DOSE) 2 X 40 MG TAB THPK	2	QLC 4 / 120 day(s)
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
carvedilol 12.5 mg tab	1	
carvedilol 25 mg tab	1	
carvedilol 3.125 mg tab	1	
carvedilol 6.25 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
labetalol hcl 100 mg tab	1	
labetalol hcl 200 mg tab	1	
labetalol hcl 300 mg tab	1	
BETA BLOCKERS CARDIO-SELECTIVE		
acebutolol hcl 200 mg cap	1	
acebutolol hcl 400 mg cap	1	
atenolol 100 mg tab	1	
atenolol 25 mg tab	1	
atenolol 50 mg tab	1	
betaxolol hcl 10 mg tab	1	
betaxolol hcl 20 mg tab	1	
bisoprolol fumarate 10 mg tab	1	
bisoprolol fumarate 5 mg tab	1	
metoprolol succinate er 100 mg tab er 24h	1	
metoprolol succinate er 200 mg tab er 24h	1	
metoprolol succinate er 25 mg tab er 24h	1	
metoprolol succinate er 50 mg tab er 24h	1	
metoprolol tartrate 100 mg tab	1	
metoprolol tartrate 25 mg tab	1	
metoprolol tartrate 37.5 mg tab	1	
metoprolol tartrate 50 mg tab	1	
metoprolol tartrate 75 mg tab	1	
nebivolol hcl 10 mg tab	1	
nebivolol hcl 2.5 mg tab	1	
nebivolol hcl 20 mg tab	1	
nebivolol hcl 5 mg tab	1	
BETA BLOCKERS NON-SELECTIVE		
nadolol 20 mg tab	1	
nadolol 40 mg tab	1	
nadolol 80 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pindolol 10 mg tab	1	
pindolol 5 mg tab	1	
propranolol hcl 10 mg tab	1	
propranolol hcl 20 mg tab	1	
propranolol hcl 20 mg/5ml solution	1	
propranolol hcl 40 mg tab	1	
PROPRANOLOL HCL 40 MG/5ML SOLUTION	1	
propranolol hcl 60 mg tab	1	
propranolol hcl 80 mg tab	1	
propranolol hcl er 120 mg cap er 24h	1	
propranolol hcl er 160 mg cap er 24h	1	
propranolol hcl er 60 mg cap er 24h	1	
propranolol hcl er 80 mg cap er 24h	1	
sorine 120 mg tab	1	
sorine 160 mg tab	1	
sorine 240 mg tab	1	
sorine 80 mg tab	1	
sotalol hcl (af) 120 mg tab	1	
sotalol hcl (af) 160 mg tab	1	
sotalol hcl (af) 80 mg tab	1	
sotalol hcl 120 mg tab	1	
sotalol hcl 160 mg tab	1	
sotalol hcl 240 mg tab	1	
sotalol hcl 80 mg tab	1	
timolol maleate 10 mg tab	1	
timolol maleate 20 mg tab	1	
timolol maleate 5 mg tab	1	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate 10 mg tab	1	
amlodipine besylate 2.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine besylate 5 mg tab	1	
cartia xt 120 mg cap er 24h	1	
cartia xt 180 mg cap er 24h	1	
cartia xt 240 mg cap er 24h	1	
cartia xt 300 mg cap er 24h	1	
dilt-xr 120 mg cap er 24h	1	
dilt-xr 180 mg cap er 24h	1	
dilt-xr 240 mg cap er 24h	1	
diltiazem hcl 120 mg tab	1	
diltiazem hcl 30 mg tab	1	
diltiazem hcl 60 mg tab	1	
diltiazem hcl 90 mg tab	1	
diltiazem hcl er 120 mg cap er 12h	1	
diltiazem hcl er 120 mg cap er 24h	1	
diltiazem hcl er 180 mg cap er 24h	1	
diltiazem hcl er 240 mg cap er 24h	1	
diltiazem hcl er 60 mg cap er 12h	1	
diltiazem hcl er 90 mg cap er 12h	1	
diltiazem hcl er beads 120 mg cap er 24h	1	
diltiazem hcl er beads 180 mg cap er 24h	1	
diltiazem hcl er beads 240 mg cap er 24h	1	
diltiazem hcl er beads 300 mg cap er 24h	1	
diltiazem hcl er beads 360 mg cap er 24h	1	
diltiazem hcl er beads 420 mg cap er 24h	1	
diltiazem hcl er coated beads 120 mg cap er 24h	1	
diltiazem hcl er coated beads 180 mg cap er 24h	1	
diltiazem hcl er coated beads 240 mg cap er 24h	1	
diltiazem hcl er coated beads 300 mg cap er 24h	1	
diltiazem hcl er coated beads 360 mg cap er 24h	1	
felodipine er 10 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
felodipine er 2.5 mg tab er 24h	1	
felodipine er 5 mg tab er 24h	1	
isradipine 2.5 mg cap	1	
isradipine 5 mg cap	1	
nicardipine hcl 20 mg cap	1	
nicardipine hcl 30 mg cap	1	
nifedipine 10 mg cap	1	
nifedipine 20 mg cap	1	
nifedipine er 30 mg tab er 24h	1	
nifedipine er 60 mg tab er 24h	1	
nifedipine er 90 mg tab er 24h	1	
nifedipine er osmotic release 30 mg tab er 24h	1	
nifedipine er osmotic release 60 mg tab er 24h	1	
nifedipine er osmotic release 90 mg tab er 24h	1	
nimodipine 30 mg cap	1	
nisoldipine er 17 mg tab er 24h	1	
NISOLDIPINE ER 20 MG TAB ER 24H	1	
NISOLDIPINE ER 25.5 MG TAB ER 24H	1	
NISOLDIPINE ER 30 MG TAB ER 24H	1	
nisoldipine er 34 mg tab er 24h	1	
NISOLDIPINE ER 40 MG TAB ER 24H	1	
nisoldipine er 8.5 mg tab er 24h	1	
taztia xt 120 mg cap er 24h	1	
taztia xt 180 mg cap er 24h	1	
taztia xt 240 mg cap er 24h	1	
taztia xt 300 mg cap er 24h	1	
taztia xt 360 mg cap er 24h	1	
tiadylt er 120 mg cap er 24h	1	
tiadylt er 180 mg cap er 24h	1	
tiadylt er 240 mg cap er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tiadylt er 300 mg cap er 24h	1	
tiadylt er 360 mg cap er 24h	1	
tiadylt er 420 mg cap er 24h	1	
verapamil hcl 120 mg tab	1	
verapamil hcl 40 mg tab	1	
verapamil hcl 80 mg tab	1	
verapamil hcl er 120 mg cap er 24h	1	
verapamil hcl er 120 mg tab er	1	
verapamil hcl er 180 mg cap er 24h	1	
verapamil hcl er 180 mg tab er	1	
verapamil hcl er 240 mg cap er 24h	1	
verapamil hcl er 240 mg tab er	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
digitek 125 mcg tab	1	
digitek 250 mcg tab	1	
digox 125 mcg tab	1	
digox 250 mcg tab	1	
digoxin 0.05 mg/ml solution	1	
digoxin 125 mcg tab	1	
digoxin 250 mcg tab	1	
CARDIOVASCULAR AGENTS - MISC.		
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO 24-26 MG TAB	1	
ENTRESTO 49-51 MG TAB	1	
ENTRESTO 97-103 MG TAB	1	
NITRATE & VASODILATOR COMBINATIONS		
BIDIL 20-37.5 MG TAB	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROSTAGLANDIN VASODILATORS		
ORENITRAM 0.125 MG TAB ER	3	QL 90 / 30 day(s) PA S Specialty Drug
ORENITRAM 0.25 MG TAB ER	3	QL 90 / 30 day(s) PA S Specialty Drug
ORENITRAM 1 MG TAB ER	3	QL 90 / 30 day(s) PA S Specialty Drug
ORENITRAM 2.5 MG TAB ER	3	QL 90 / 30 day(s) PA S Specialty Drug
ORENITRAM 5 MG TAB ER	3	QL 90 / 30 day(s) PA S Specialty Drug
ORENITRAM MONTH 1 0.125 & 0.25 MG TBER THPK	3	PA S Specialty Drug QLC 168/180 day(s)
ORENITRAM MONTH 2 0.125 & 0.25 MG TBER THPK	3	PA S Specialty Drug QLC 336/180 day(s)
ORENITRAM MONTH 3 0.125 & 0.25 &1 MG TBER THPK	3	PA S Specialty Drug QLC 252/180 day(s)
TYVASO 0.6 MG/ML SOLUTION	3	QL 81.2 / 28 day(s) PA S Specialty Drug
TYVASO REFILL 0.6 MG/ML SOLUTION	3	QL 81.2 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYVASO STARTER 0.6 MG/ML SOLUTION	3	QL 81.2 / 30 day(s) PA S Specialty Drug
VENTAVIS 10 MCG/ML SOLUTION	3	QL 270 / 30 day(s) PA S Specialty Drug
VENTAVIS 20 MCG/ML SOLUTION	3	QL 270 / 30 day(s) PA S Specialty Drug
PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
ADEMPAS 0.5 MG TAB	1	QL 90 / 30 day(s) PA S Specialty Drug
ADEMPAS 1 MG TAB	1	QL 90 / 30 day(s) PA S Specialty Drug
ADEMPAS 1.5 MG TAB	1	QL 90 / 30 day(s) PA S Specialty Drug
ADEMPAS 2 MG TAB	1	QL 90 / 30 day(s) PA S Specialty Drug
ADEMPAS 2.5 MG TAB	1	QL 90 / 30 day(s) PA S Specialty Drug
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
ambrisentan 10 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
ambrisentan 5 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bosentan 125 mg tab	1	QL 60 / 30 day(s) PA S Specialty Drug
bosentan 62.5 mg tab	1	QL 60 / 30 day(s) PA S Specialty Drug
OPSUMIT 10 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
TRACLEER 32 MG TAB SOL	2	QL 120 / 30 day(s) PA S Specialty Drug
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
alyq 20 mg tab	1	QL 60 / 30 day(s) PA S Specialty Drug
sildenafil citrate 10 mg/ml recon susp	2	QL 224 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
sildenafil citrate 20 mg tab	1	QL 90 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
tadalafil (pah) 20 mg tab	1	QL 60 / 30 day(s) PA S Specialty Drug
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI 1000 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UPTRAVI 1200 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 1400 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 1600 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 200 & 800 MCG TAB THPK	1	QL 200 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 200 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 400 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 600 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 800 MCG TAB	1	QL 60 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS		
sildenafil citrate 100 mg tab	1	QL 6 / 30 day(s) AL1 At least 18 yrs old
sildenafil citrate 25 mg tab	1	QL 6 / 30 day(s) AL1 At least 18 yrs old
sildenafil citrate 50 mg tab	1	QL 6 / 30 day(s) AL1 At least 18 yrs old
tadalafil 10 mg tab	1	QL 6 / 30 day(s)
tadalafil 2.5 mg tab	1	QL 30 / 30 day(s)
tadalafil 20 mg tab	1	QL 6 / 30 day(s)
tadalafil 5 mg tab	1	QL 30 / 30 day(s)
SINUS NODE INHIBITORS		
CORLANOR 5 MG TAB	2	QL 60 / 30 day(s) PA
CORLANOR 5 MG/5ML SOLUTION	2	QL 600 / 30 day(s) PA
CORLANOR 7.5 MG TAB	2	QL 60 / 30 day(s) PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX 61 MG CAP	1	QL 30 / 30 day(s) PA S Specialty Drug
VYNDAQEL 20 MG CAP	1	QL 120 / 30 day(s) PA S Specialty Drug
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
cefadroxil 250 mg/5ml recon susp	1	
cefadroxil 500 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cefadroxil 500 mg/5ml recon susp	1	
cephalexin 125 mg/5ml recon susp	1	
cephalexin 250 mg cap	1	
cephalexin 250 mg/5ml recon susp	1	
cephalexin 500 mg cap	1	
cephalexin 750 mg cap	1	
CEPHALOSPORINS - 2ND GENERATION		
cefprozil 125 mg/5ml recon susp	1	
cefprozil 250 mg tab	1	
cefprozil 250 mg/5ml recon susp	1	
cefprozil 500 mg tab	1	
cefuroxime axetil 250 mg tab	1	
cefuroxime axetil 500 mg tab	1	
CEPHALOSPORINS - 3RD GENERATION		
cefdinir 125 mg/5ml recon susp	1	
cefdinir 250 mg/5ml recon susp	1	
cefdinir 300 mg cap	1	
cefixime 100 mg/5ml recon susp	2	QL 1200 / 90 day(s)
cefixime 200 mg/5ml recon susp	2	QL 1200 / 90 day(s)
cefixime 400 mg cap	2	
cefpodoxime proxetil 100 mg tab	2	
cefpodoxime proxetil 100 mg/5ml recon susp	1	
cefpodoxime proxetil 200 mg tab	2	
cefpodoxime proxetil 50 mg/5ml recon susp	1	
CHEMICALS		
SOLID COMBINATIONS		
SODIUM BICARBONATE-NACL POWDER	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CONTRACEPTIVES		
BIPHASIC CONTRACEPTIVES - ORAL		
azurette 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
kariva 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB	1	ACA Affordable Care Act
pimtrea 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
simliya 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
viorele 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
volnea 0.15-0.02/0.01 mg (21/5) tab	1	ACA Affordable Care Act
COMBINATION CONTRACEPTIVES - ORAL		
afirmelle 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
altavera 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
alyacen 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
apri 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
aubra 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
aubra eq 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
aurovela 1.5/30 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
aurovela 1/20 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
aurovela 24 fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
aurovela fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
aurovela fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
aviane 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
ayuna 0.15-30 mg-mcg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
balziva 0.4-35 mg-mcg tab	1	ACA Affordable Care Act
blisovi 24 fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
blisovi fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
blisovi fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
briellyn 0.4-35 mg-mcg tab	1	ACA Affordable Care Act
charlotte 24 fe 1-20 mg-mcg(24) chew tab	1	ACA Affordable Care Act
chateal 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
chateal eq 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
cryselle-28 0.3-30 mg-mcg tab	1	ACA Affordable Care Act
cyclafem 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
cyred 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
cyred eq 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
dasetta 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
delyla 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
desogestrel-ethinyl estradiol 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
drospiren-eth estrad-levomefol 3-0.02-0.451 mg tab	1	ACA Affordable Care Act
drospiren-eth estrad-levomefol 3-0.03-0.451 mg tab	1	ACA Affordable Care Act
drospirenone-ethinyl estradiol 3-0.02 mg tab	1	ACA Affordable Care Act
drospirenone-ethinyl estradiol 3-0.03 mg tab	1	ACA Affordable Care Act
elinest 0.3-30 mg-mcg tab	1	ACA Affordable Care Act
emoquette 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
enskyce 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
estarylla 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
ethynodiol diac-eth estradiol 1-35 mg-mcg tab	1	ACA Affordable Care Act
ethynodiol diac-eth estradiol 1-50 mg-mcg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
falmina 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
femynor 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
finzala 1-20 mg-mcg(24) chew tab	1	ACA Affordable Care Act
gianvi 3-0.02 mg tab	1	ACA Affordable Care Act
hailey 1.5/30 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
hailey 24 fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
hailey fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
hailey fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
isibloom 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
jasmiel 3-0.02 mg tab	1	ACA Affordable Care Act
juleber 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
junel 1.5/30 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
junel 1/20 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
junel fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
junel fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
junel fe 24 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
kaitlib fe 0.8-25 mg-mcg chew tab	1	ACA Affordable Care Act
kalliga 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
kelnor 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
kelnor 1/50 1-50 mg-mcg tab	1	ACA Affordable Care Act
kurvelo 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
larin 1.5/30 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
larin 1/20 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
larin 24 fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
larin fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
larin fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
larissia 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
layolis fe 0.8-25 mg-mcg chew tab	1	ACA Affordable Care Act
lessina 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
levonorgestrel-ethinyl estrad 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
levonorgestrel-ethinyl estrad 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
levora 0.15/30 (28) 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
lillow 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
lo-zumandimine 3-0.02 mg tab	1	ACA Affordable Care Act
loestrin 1.5/30 (21) 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
loestrin 1/20 (21) 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
loestrin fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
loestrin fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
loryna 3-0.02 mg tab	1	ACA Affordable Care Act
low-ogestrel 0.3-30 mg-mcg tab	1	ACA Affordable Care Act
lutera 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
marlissa 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
melodetta 24 fe 1-20 mg-mcg(24) chew tab	1	ACA Affordable Care Act
mibelas 24 fe 1-20 mg-mcg(24) chew tab	1	ACA Affordable Care Act
microgestin 1.5/30 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
microgestin 1/20 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
microgestin 24 fe 1-20 mg-mcg tab	1	ACA Affordable Care Act
microgestin fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
microgestin fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
mili 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
mono-linyah 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
necon 0.5/35 (28) 0.5-35 mg-mcg tab	1	ACA Affordable Care Act
nikki 3-0.02 mg tab	1	ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg tab	1	ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg(24) chew tab	1	ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
norethin ace-eth estrad-fe 1.5-30 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
norethin-eth estradiol-fe 0.4-35 mg-mcg chew tab	1	ACA Affordable Care Act
norethin-eth estradiol-fe 0.8-25 mg-mcg chew tab	1	ACA Affordable Care Act
norethindrone acet-ethinyl est 1-20 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
norethindrone acet-ethinyl est 1.5-30 mg-mcg tab	1	ACA Affordable Care Act
norgestimate-eth estradiol 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
nortrel 0.5/35 (28) 0.5-35 mg-mcg tab	1	ACA Affordable Care Act
nortrel 1/35 (21) 1-35 mg-mcg tab	1	ACA Affordable Care Act
nortrel 1/35 (28) 1-35 mg-mcg tab	1	ACA Affordable Care Act
nylia 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
nymyo 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
ocella 3-0.03 mg tab	1	ACA Affordable Care Act
OGESTREL 0.5-50 MG-MCG TAB	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
orsythia 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
philith 0.4-35 mg-mcg tab	1	ACA Affordable Care Act
pirmella 1/35 1-35 mg-mcg tab	1	ACA Affordable Care Act
portia-28 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
previfem 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
reclipsen 0.15-30 mg-mcg tab	1	ACA Affordable Care Act
sprintec 28 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
sronyx 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
syeda 3-0.03 mg tab	1	ACA Affordable Care Act
tarina 24 fe 1-20 mg-mcg(24) tab	1	ACA Affordable Care Act
tarina fe 1/20 1-20 mg-mcg tab	1	ACA Affordable Care Act
tarina fe 1/20 eq 1-20 mg-mcg tab	1	ACA Affordable Care Act
turqoz 0.3-30 mg-mcg tab	1	ACA Affordable Care Act
TYBLUME 0.1-20 MG-MCG CHEW TAB	1	ACA Affordable Care Act
tydemy 3-0.03-0.451 mg tab	1	ACA Affordable Care Act
vestura 3-0.02 mg tab	1	ACA Affordable Care Act
vienva 0.1-20 mg-mcg tab	1	ACA Affordable Care Act
vyfemla 0.4-35 mg-mcg tab	1	ACA Affordable Care Act
vylibra 0.25-35 mg-mcg tab	1	ACA Affordable Care Act
wera 0.5-35 mg-mcg tab	1	ACA Affordable Care Act
wymzya fe 0.4-35 mg-mcg chew tab	1	ACA Affordable Care Act
zarah 3-0.03 mg tab	1	ACA Affordable Care Act
zovia 1/35 (28) 1-35 mg-mcg tab	1	ACA Affordable Care Act
zovia 1/35e (28) 1-35 mg-mcg tab	1	ACA Affordable Care Act
zumandimine 3-0.03 mg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
norelgestromin-eth estradiol 150-35 mcg/24hr patch wk	1	QL 3 / 21 day(s) ACA Affordable Care Act
xulane 150-35 mcg/24hr patch wk	1	QL 3 / 21 day(s) ACA Affordable Care Act
zafemy 150-35 mcg/24hr patch wk	1	QL 3 / 21 day(s) ACA Affordable Care Act
COMBINATION CONTRACEPTIVES - VAGINAL		
NUVARING 0.12-0.015 MG/24HR RING	1	ACA Affordable Care Act
CONTINUOUS CONTRACEPTIVES - ORAL		
amethyst 90-20 mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
dolishale 90-20 mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
levonorgestrel-ethinyl estrad 90-20 mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
COPPER CONTRACEPTIVES - IUD		
PARAGARD INTRAUTERINE COPPER IUD	1	ACA Affordable Care Act
EMERGENCY CONTRACEPTIVES		
aftera 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
afterpill 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
curae 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
econtra ez 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
econtra one-step 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELLA 30 MG TAB	1	ACA Affordable Care Act
her style 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
levonorgestrel 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
my choice 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
my way 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
new day 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
opcicon one-step 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
option 2 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
preventeza 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
react 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
take action 1.5 mg tab	1	ACA Affordable Care Act OTC Over the Counter
EXTENDED-CYCLE CONTRACEPTIVES - ORAL		
amethia 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
ashlyna 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
camrese 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
camrese lo 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
daysee 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
fayosim 42-21-21-7 days tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
iclevia 0.15-0.03 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
introvale 0.15-0.03 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
jaimiess 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
jolessa 0.15-0.03 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
levonorgest-eth est & eth est 42-21-21-7 days tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.15-0.03 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
lojaimiess 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
rivelsa 42-21-21-7 days tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
setlakin 0.15-0.03 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act
simpesse 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FOUR PHASE CONTRACEPTIVES - ORAL		
NATAZIA 3/2-2/2-3/1 MG TAB	2	ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR	1	QL 90 / 90 day(s) ACA Affordable Care Act
medroxyprogesterone acetate 150 mg/ml susp prsyr	1	QL 90 / 90 day(s) ACA Affordable Care Act
medroxyprogesterone acetate 150 mg/ml suspension	1	QL 1.2 / 28 day(s) ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA 19.5 MG IUD	1	ACA Affordable Care Act
LILETTA (52 MG) 20.1 MCG/DAY IUD	1	ACA Affordable Care Act
MIRENA (52 MG) 20 MCG/DAY IUD	1	ACA Affordable Care Act
SKYLA 13.5 MG IUD	1	ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - ORAL		
camila 0.35 mg tab	1	ACA Affordable Care Act
deblitane 0.35 mg tab	1	ACA Affordable Care Act
emzahh 0.35 mg tab	1	ACA Affordable Care Act
errin 0.35 mg tab	1	ACA Affordable Care Act
heather 0.35 mg tab	1	ACA Affordable Care Act
incassia 0.35 mg tab	1	ACA Affordable Care Act
jencycla 0.35 mg tab	1	ACA Affordable Care Act
lyleq 0.35 mg tab	1	ACA Affordable Care Act
lyza 0.35 mg tab	1	ACA Affordable Care Act
nora-be 0.35 mg tab	1	ACA Affordable Care Act
norethindrone 0.35 mg tab	1	ACA Affordable Care Act
norlyda 0.35 mg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norlyroc 0.35 mg tab	1	ACA Affordable Care Act
sharobel 0.35 mg tab	1	ACA Affordable Care Act
tulana 0.35 mg tab	1	ACA Affordable Care Act
TRIPHASIC CONTRACEPTIVES - ORAL		
alyacen 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	ACA Affordable Care Act
aranelle 0.5/1/0.5-35 mg-mcg tab	1	ACA Affordable Care Act
caziant 0.1/0.125/0.15 -0.025 mg tab	1	ACA Affordable Care Act
dasetta 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	ACA Affordable Care Act
enpresse-28 50-30/75-40/ 125-30 mcg tab	1	ACA Affordable Care Act
leena 0.5/1/0.5-35 mg-mcg tab	1	ACA Affordable Care Act
levonest 50-30/75-40/ 125-30 mcg tab	1	ACA Affordable Care Act
levonorg-eth estrad triphasic 50-30/75-40/ 125-30 mcg tab	1	ACA Affordable Care Act
norethindron-ethinyl estrad-fe 1-20/1-30/1-35 mg-mcg tab	1	ACA Affordable Care Act
norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act
norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
nortrel 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	ACA Affordable Care Act
nylia 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	ACA Affordable Care Act
pirmella 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	ACA Affordable Care Act
tilia fe 1-20/1-30/1-35 mg-mcg tab	1	ACA Affordable Care Act
tri femynor 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-estarylla 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-legest fe 1-20/1-30/1-35 mg-mcg tab	1	ACA Affordable Care Act
tri-linyah 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-lo-estarylla 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act
tri-lo-marzia 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act
tri-lo-mili 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tri-lo-sprintec 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act
tri-mili 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-nymyo 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-previfem 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-sprintec 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-vylibra 0.18/0.215/0.25 mg-35 mcg tab	1	ACA Affordable Care Act
tri-vylibra lo 0.18/0.215/0.25 mg-25 mcg tab	1	ACA Affordable Care Act
trivora (28) 50-30/75-40/ 125-30 mcg tab	1	ACA Affordable Care Act
VELIVET 0.1/0.125/0.15 -0.025 MG TAB	1	ACA Affordable Care Act
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
budesonide 3 mg cp dr part	1	
dexamethasone 0.5 mg tab	1	
dexamethasone 0.5 mg/5ml elixir	1	
DEXAMETHASONE 0.5 MG/5ML SOLUTION	1	
dexamethasone 0.75 mg tab	1	
dexamethasone 1 mg tab	1	
dexamethasone 1.5 mg tab	1	
dexamethasone 2 mg tab	1	
dexamethasone 4 mg tab	1	
dexamethasone 6 mg tab	1	
DEXAMETHASONE INTENSOL 1 MG/ML CONC	1	
hydrocortisone 10 mg tab	1	
hydrocortisone 20 mg tab	1	
hydrocortisone 5 mg tab	1	
methylprednisolone 16 mg tab	1	
methylprednisolone 32 mg tab	1	
methylprednisolone 4 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylprednisolone 4 mg tab thpk	1	
methylprednisolone 8 mg tab	1	
prednisolone 15 mg/5ml solution	1	
prednisolone sodium phosphate 15 mg/5ml solution	1	
PREDNISOLONE SODIUM PHOSPHATE 25 MG/5ML SOLUTION	1	
prednisolone sodium phosphate 25 mg/5ml solution	1	
prednisolone sodium phosphate 6.7 (5 base) mg/5ml solution	1	
prednisone 1 mg tab	1	
prednisone 10 mg (21) tab thpk	1	
prednisone 10 mg (48) tab thpk	1	
prednisone 10 mg tab	1	
prednisone 2.5 mg tab	1	
prednisone 20 mg tab	1	
prednisone 5 mg (21) tab thpk	1	
prednisone 5 mg (48) tab thpk	1	
prednisone 5 mg tab	1	
PREDNISONE 5 MG/5ML SOLUTION	2	
prednisone 50 mg tab	1	
MINERALOCORTICOIDS		
fludrocortisone acetate 0.1 mg tab	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVE - NONNARCOTIC		
benzonatate 100 mg cap	1	AL1 At least 10 yrs old
benzonatate 200 mg cap	1	AL1 At least 10 yrs old
ANTITUSSIVE - OPIOID		
hydrocodone bit-homatrop mbr 5-1.5 mg/5ml solution	1	QL 900 / 30 day(s) AL1 At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTITUSSIVE-EXPECTORANT		
altarussin dm 100-10 mg/5ml syrup	1	OTC Over the Counter
chest congestion relief dm 10-100 mg/5ml syrup	1	OTC Over the Counter
chest congestion relief dm 20-400 mg tab	1	OTC Over the Counter
chest congestion/cough relief 20-400 mg tab	1	OTC Over the Counter
cough/chest congestion dm 10-100 mg/5ml syrup	1	OTC Over the Counter
curanex dm 20-400 mg tab	1	OTC Over the Counter
cvs chest congestion relief dm 20-400 mg tab	1	OTC Over the Counter
dextromethorphan-guaifenesin 10-100 mg/5ml syrup	1	OTC Over the Counter
dextromethorphan-guaifenesin 20-200 mg/10ml syrup	1	OTC Over the Counter
dextromethorphan-guaifenesin 20-400 mg tab	1	OTC Over the Counter
eq tussin dm cough/chest 10-100 mg/5ml syrup	1	OTC Over the Counter
eql tussin dm cough/chest cong 100-10 mg/5ml syrup	1	OTC Over the Counter
fenesin dm ir 20-400 mg tab	1	OTC Over the Counter
ft chest congestion relief dm 20-400 mg tab	1	OTC Over the Counter
geri-tussin dm 10-100 mg/5ml syrup	1	OTC Over the Counter
gnp mucus relief dm 20-400 mg tab	1	OTC Over the Counter
gnp tab tussin dm 20-400 mg tab	1	OTC Over the Counter
goodsense mucus relief dm 20-400 mg tab	1	OTC Over the Counter
guaicon dms 100-10 mg/5ml syrup	1	OTC Over the Counter
guaifenesin-codeine 100-10 mg/5ml solution	1	OTC Over the Counter
guaifenesin-dm 100-10 mg/5ml syrup	1	OTC Over the Counter
hm chest congestion relief dm 20-400 mg tab	1	OTC Over the Counter
medi-tussin dm 100-10 mg/5ml syrup	1	OTC Over the Counter
mucosa dm 20-400 mg tab	1	OTC Over the Counter
mucus relief dm 20-400 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mucus relief dm cough 20-400 mg tab	1	OTC Over the Counter
mucusrelief dm cough 20-400 mg tab	1	OTC Over the Counter
pharbinex-dm 20-400 mg tab	1	OTC Over the Counter
qc medifin dm 20-400 mg tab	1	OTC Over the Counter
ra tussin cough dm sugar free 100-10 mg/5ml syrup	1	OTC Over the Counter
refenesen dm 400-20 mg tab	1	OTC Over the Counter
sb mucus relief dm 20-400 mg tab	1	OTC Over the Counter
sb tab tussin dm 20-400 mg tab	1	OTC Over the Counter
siltussin-dm alcohol free 100-10 mg/5ml syrup	1	OTC Over the Counter
sm chest congestion relief dm 20-400 mg tab	1	OTC Over the Counter
sm tussin cough/chest congest 100-10 mg/5ml syrup	1	OTC Over the Counter
sm tussin dm 100-10 mg/5ml syrup	1	OTC Over the Counter
tgt mucus/cough relief 20-400 mg tab	1	OTC Over the Counter
tussin dm 100-10 mg/5ml syrup	1	OTC Over the Counter
wal-tussin cough/chest dm 100-10 mg/5ml syrup	1	OTC Over the Counter
DECONGESTANT & ANTIHISTAMINE		
PROMETHAZINE VC 6.25-5 MG/5ML SYRUP	1	AL1 At least 2 yrs old
promethazine-phenylephrine 6.25-5 mg/5ml syrup	1	AL1 At least 2 yrs old
EXPECTORANTS		
altarussin 100 mg/5ml liquid	1	OTC Over the Counter
bidex 400 mg tab	1	OTC Over the Counter
buckleys chest congestion 100 mg/5ml liquid	1	OTC Over the Counter
chest congestion childrens 100 mg/5ml liquid	1	OTC Over the Counter
chest congestion relief 100 mg/5ml liquid	1	OTC Over the Counter
chest congestion relief 400 mg tab	1	OTC Over the Counter
chest congestion relief child 100 mg/5ml liquid	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
childrens mucus relief expect 100 mg/5ml liquid	1	OTC Over the Counter
coughtab 200 mg tab	1	OTC Over the Counter
cvs chest congestion childrens 100 mg/5ml liquid	1	OTC Over the Counter
cvs chest congestion relief 400 mg tab	1	OTC Over the Counter
cvs tussin adult chest congest 100 mg/5ml liquid	1	OTC Over the Counter
diabetic tussin 100 mg/5ml liquid	1	OTC Over the Counter
diabetic tussin chest/congest 100 mg/5ml liquid	1	OTC Over the Counter
diabetic tussin ex 100 mg/5ml liquid	1	OTC Over the Counter
eql tussin mucus/chest congest 100 mg/5ml liquid	1	OTC Over the Counter
ft chest congestion relief 400 mg tab	1	OTC Over the Counter
ft tussin adult 200 mg/10ml liquid	1	OTC Over the Counter
geri-tussin 100 mg/5ml liquid	1	OTC Over the Counter
gnp mucus relief 400 mg tab	1	OTC Over the Counter
gnp tab tussin 400 mg tab	1	OTC Over the Counter
gnp tussin mucus & chest cong 100 mg/5ml liquid	1	OTC Over the Counter
goodsense mucus relief 400 mg tab	1	OTC Over the Counter
guaifenesin 100 mg/5ml liquid	1	OTC Over the Counter
guaifenesin 200 mg tab	1	OTC Over the Counter
guaifenesin 400 mg tab	1	OTC Over the Counter
hm chest congestion relief 400 mg tab	1	OTC Over the Counter
hm tussin adult 100 mg/5ml liquid	1	OTC Over the Counter
kls mucus relief chest 400 mg tab	1	OTC Over the Counter
liquibid 400 mg tab	1	OTC Over the Counter
max tussin mucus & chest cong 200 mg/10ml liquid	1	OTC Over the Counter
mucinex fast-max chest cong ms 400 mg/20ml liquid	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mucosa 400 mg tab	1	OTC Over the Counter
mucus & chest congestion 100 mg/5ml liquid	1	OTC Over the Counter
mucus relief 400 mg tab	1	OTC Over the Counter
mucus relief chest congestion 200 mg tab	1	OTC Over the Counter
mucus relief chest congestion 400 mg tab	1	OTC Over the Counter
mucus relief chest congestion 400 mg/20ml liquid	1	OTC Over the Counter
mucus+chest congestion 200 mg/10ml liquid	1	OTC Over the Counter
pharbinex 400 mg tab	1	OTC Over the Counter
px tussin 100 mg/5ml liquid	1	OTC Over the Counter
qc medifin 400 400 mg tab	1	OTC Over the Counter
qc medifin mucus relief child 100 mg/5ml liquid	1	OTC Over the Counter
qc mucus relief childrens 100 mg/5ml liquid	1	OTC Over the Counter
qc tussin expectorant adult 100 mg/5ml liquid	1	OTC Over the Counter
qc tussin mucus/congestion 100 mg/5ml liquid	1	OTC Over the Counter
ra tussin 100 mg/5ml liquid	1	OTC Over the Counter
ra tussin chest congestion 100 mg/5ml liquid	1	OTC Over the Counter
refenesen 400 400 mg tab	1	OTC Over the Counter
robafen 100 mg/5ml liquid	1	OTC Over the Counter
robafen mucus/chest congestion 200 mg/10ml liquid	1	OTC Over the Counter
robitussin mucus+chest congest 100 mg/5ml liquid	1	OTC Over the Counter
sb cough control 100 mg/5ml liquid	1	OTC Over the Counter
sb coughtab 200 mg tab	1	OTC Over the Counter
sb mucus relief 400 mg tab	1	OTC Over the Counter
scot-tussin expectorant 100 mg/5ml liquid	1	OTC Over the Counter
siltussin sa 100 mg/5ml liquid	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm chest congestion relief 400 mg tab	1	OTC Over the Counter
sm mucus relief childrens 100 mg/5ml liquid	1	OTC Over the Counter
sm tussin mucus+chest congest 100 mg/5ml liquid	1	OTC Over the Counter
tusnel-ex 100 mg/5ml liquid	1	OTC Over the Counter
tussin 100 mg/5ml liquid	1	OTC Over the Counter
tussin mucus & chest congest 100 mg/5ml liquid	1	OTC Over the Counter
tussin mucus+chest congest sf 200 mg/10ml liquid	1	OTC Over the Counter
tussin mucus+chest congestion 100 mg/5ml liquid	1	OTC Over the Counter
wal-tussin 100 mg/5ml liquid	1	OTC Over the Counter
wal-tussin chest congestion 100 mg/5ml liquid	1	OTC Over the Counter
xpect 400 mg tab	1	OTC Over the Counter
MISC. RESPIRATORY INHALANTS		
nebusal 3 % nebu soln	1	
pulmosal 7 % nebu soln	1	
sodium chloride 3 % nebu soln	1	
sodium chloride 7 % nebu soln	1	
MUCOLYTICS		
acetylcysteine 10 % solution	1	
acetylcysteine 20 % solution	1	
NON-NARC ANTITUSSIVE-ANTIHISTAMINE		
promethazine-dm 6.25-15 mg/5ml syrup	1	AL1 At least 2 yrs old
NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
bromfed dm 2-30-10 mg/5ml syrup	1	AL1 At least 2 yrs old
pseudoeph-bromphen-dm 30-2-10 mg/5ml syrup	1	AL1 At least 2 yrs old
OPIOID ANTITUSSIVE-ANTIHISTAMINE		
promethazine-codeine 6.25-10 mg/5ml solution	1	AL1 At least 12 yrs old
promethazine-codeine 6.25-10 mg/5ml syrup	1	AL1 At least 6 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPIOID ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
PROMETHAZINE VC/CODEINE 6.25-5-10 MG/5ML SYRUP	1	QL 900 / 30 day(s) AL1 At least 6 yrs old
promethazine-phenyleph-codeine 6.25-5-10 mg/5ml syrup	1	QL 900 / 30 day(s) AL1 At least 6 yrs old
DERMATOLOGICALS		
ACNE ANTIBIOTICS		
clindamycin phosphate 1 % gel	1	QL 75 / 30 days
clindamycin phosphate 1 % gel	1	QL 75 / 30 days
clindamycin phosphate 1 % lotion	1	
clindamycin phosphate 1 % solution	1	
dapsone 5 % gel	1	QL 90 / 30 day(s)
dapsone 7.5 % gel	1	QL 90 / 30 day(s)
erythromycin 2 % gel	1	QL 60 / 30 day(s)
erythromycin 2 % solution	1	
sulfacetamide sodium (acne) 10 % lotion	1	QL 120 / 30 day(s)
ACNE COMBINATIONS		
adapalene-benzoyl peroxide 0.1-2.5 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
adapalene-benzoyl peroxide 0.3-2.5 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
clindamycin phos-benzoyl perox 1.2-2.5 % gel	1	QL 50 / 30 day(s)
clindamycin phos-benzoyl perox 1.2-5 % gel	1	QL 45 / 30 day(s)
neuac 1.2-5 % gel	1	QL 45 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACNE PRODUCTS		
accutane 10 mg cap	1	
accutane 20 mg cap	1	
accutane 30 mg cap	1	
accutane 40 mg cap	1	
acne foaming wash 10 % liquid	1	OTC Over the Counter
acne maximum strength 10 % cream	1	OTC Over the Counter
acne medication 10 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
ACNE MEDICATION 10 10 % LOTION	1	OTC Over the Counter
acne medication 2.5 2.5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
acne medication 5 5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
acne treatment 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
acne-clear 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
adapalene 0.1 % cream	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
adapalene 0.1 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
adapalene 0.3 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amnesteem 10 mg cap	1	
amnesteem 20 mg cap	1	
amnesteem 40 mg cap	1	
avita 0.025 % cream	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
avita 0.025 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
benzefoam 5.3 % foam	1	OTC Over the Counter
benzoyl peroxide 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
benzoyl peroxide 10 % liquid	1	OTC Over the Counter
benzoyl peroxide 2.5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
benzoyl peroxide 5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
benzoyl peroxide 5.3 % foam	1	OTC Over the Counter
BENZOYL PEROXIDE CLEANSER 6 % LIQUID	1	OTC Over the Counter
benzoyl peroxide wash 10 % liquid	1	OTC Over the Counter
benzoyl peroxide wash 10 % liquid	1	OTC Over the Counter
benzoyl peroxide wash 5 % liquid	1	OTC Over the Counter
benzoyl peroxide wash 5 % liquid	1	OTC Over the Counter
bp gel 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
bp gel 5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bp wash 10 % liquid	1	OTC Over the Counter
bp wash 5 % liquid	1	OTC Over the Counter
bp wash 7 % liquid	1	OTC Over the Counter
claravis 10 mg cap	1	
claravis 20 mg cap	1	
claravis 30 mg cap	1	
claravis 40 mg cap	1	
clean & clear persa-gel max st 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
clearasil daily clear acne 10 % cream	1	OTC Over the Counter
clearasil rapid rescue spot 10 % cream	1	OTC Over the Counter
clearskin 10 % cream	1	OTC Over the Counter
cvs acne 10 % cream	1	OTC Over the Counter
cvs acne control cleanser 10 % cream	1	OTC Over the Counter
cvs acne foaming face wash 10 % liquid	1	OTC Over the Counter
cvs acne treatment 10 % cream	1	OTC Over the Counter
cvs acne treatment 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
cvs advanced 3-in-1 cleanser 5 % liquid	1	OTC Over the Counter
cvs foaming acne face wash 10 % liquid	1	OTC Over the Counter
DIFFERIN 0.1 % GEL	1	QL 45 / 30 day(s) PA AL1 Up to 26 yrs old OTC Over the Counter
gnp acne treatment 10 % cream	1	OTC Over the Counter
isotretinoin 10 mg cap	1	
isotretinoin 20 mg cap	1	
isotretinoin 30 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
isotretinoin 40 mg cap	1	
kp benzoyl peroxide 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
kp benzoyl peroxide 5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
kp benzoyl peroxide wash 5 % liquid	1	OTC Over the Counter
medpura benzoyl peroxide 10 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
medpura benzoyl peroxide 10 % liquid	1	OTC Over the Counter
medpura benzoyl peroxide 5 % gel	1	AL1 At least 7 yrs old OTC Over the Counter
medpura benzoyl peroxide 5 % liquid	1	OTC Over the Counter
myorisan 10 mg cap	1	
myorisan 20 mg cap	1	
myorisan 30 mg cap	1	
myorisan 40 mg cap	1	
panoxyl foaming wash 10 % liquid	1	OTC Over the Counter
tretinoin 0.01 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
tretinoin 0.025 % cream	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
tretinoin 0.025 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tretinoin 0.05 % gel	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
tretinoin 0.1 % cream	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
zenatane 10 mg cap	1	
zenatane 20 mg cap	1	
zenatane 30 mg cap	1	
zenatane 40 mg cap	1	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
diclofenac sodium 1 % gel	1	QL 1000 / 30 day(s)
VOLTAREN ARTHRITIS PAIN 1 % GEL	1	QL 1000 / 30 day(s) OTC Over the Counter
ANTIBIOTIC MIXTURES TOPICAL		
curad triple antibiotic 5-400-5000 ointment	1	OTC Over the Counter
cvs antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
cvs poly bacitracin 500-10000 unit/gm ointment	1	OTC Over the Counter
double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter
double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter
eq triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
eql first aid antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
first aid antibiotic 3.5-500-10000 ointment	1	OTC Over the Counter
gnp triple antibiotic ointment	1	OTC Over the Counter
goodsense first aid antibiotic ointment	1	OTC Over the Counter
hm double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hm triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
kp double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter
lanabiotic 5-500-10000 ointment	1	OTC Over the Counter
medi-first triple antibiotic 5-400-5000 mg-unit ointment	1	OTC Over the Counter
meijer triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
neosporin 500-10000 unit/gm ointment	1	OTC Over the Counter
poly bacitracin 500-10000 unit/gm ointment	1	OTC Over the Counter
px triple 3.5-400-5000 ointment	1	OTC Over the Counter
qc triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
ra double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter
ra triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
sb triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
sm double antibiotic 500-10000 unit/gm ointment	1	OTC Over the Counter
sm triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
sm triple antibiotic original 3.5-400-5000 ointment	1	OTC Over the Counter
triple antibiotic ointment	1	OTC Over the Counter
triple antibiotic ointment	1	OTC Over the Counter
triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
triple antibiotic 3.5-400-5000 ointment	1	OTC Over the Counter
triple antibiotic 5-400-5000 ointment	1	OTC Over the Counter
triple antibiotic 5-400-5000 ointment	1	OTC Over the Counter
triple antibiotic 5-400-5000 mg-unit ointment	1	OTC Over the Counter
triple antibiotic 5-400-5000 mg-unit ointment	1	OTC Over the Counter
triple antibiotic first aid 3.5-400-5000 ointment	1	OTC Over the Counter
wal-sporin 500-100000 unit/gm ointment	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIBIOTICS - TOPICAL		
antibiotic 500 unit/gm ointment	1	OTC Over the Counter
bacitracin 500 unit/gm ointment	1	OTC Over the Counter
bacitracin 500 unit/gm ointment	1	OTC Over the Counter
bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
bacitracin zinc-aloe 500 unit/gm ointment	1	OTC Over the Counter
bacitraycin plus 500 unit/gm ointment	1	OTC Over the Counter
cvs bacitracin 500 unit/gm ointment	1	OTC Over the Counter
cvs bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
eq bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
eql bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
gentamicin sulfate 0.1 % cream	1	
gentamicin sulfate 0.1 % ointment	1	
gnp bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
hm bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
kp bacitracin zinc 500 unit/gm ointment	1	OTC Over the Counter
mupirocin 2 % ointment	1	
qc bacitracin 500 unit/gm ointment	1	OTC Over the Counter
ra bacitracin 500 unit/gm ointment	1	OTC Over the Counter
ra bacitracin zinc first aid 500 unit/gm ointment	1	OTC Over the Counter
sb bacitracin 500 unit/gm ointment	1	OTC Over the Counter
sm antibiotic 500 unit/gm ointment	1	OTC Over the Counter
ANTIFUNGALS - TOPICAL		
athletes foot (terbinafine) 1 % cream	1	OTC Over the Counter
athletes foot af 1 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
athletes foot spray 1 % aerosol	1	OTC Over the Counter
ciclodan 8 % solution	1	QL 6.6 / 30 day(s)
ciclopirox 0.77 % gel	1	
ciclopirox 1 % shampoo	1	
ciclopirox 8 % solution	1	QL 6.6 / 30 day(s)
ciclopirox olamine 0.77 % cream	1	
ciclopirox olamine 0.77 % suspension	1	
cvs athletes foot 1 % aerosol	1	OTC Over the Counter
cvs athletes foot 1 % cream	1	OTC Over the Counter
cvs jock itch 1 % cream	1	OTC Over the Counter
eq athletes foot (terbinafine) 1 % cream	1	OTC Over the Counter
eql athletes foot(terbinafine) 1 % cream	1	OTC Over the Counter
ft athletes foot (terbinafine) 1 % cream	1	OTC Over the Counter
gnp terbinafine hydrochloride 1 % cream	1	OTC Over the Counter
klayesta 100000 unit/gm powder	1	
kp terbinafine hydrochloride 1 % cream	1	OTC Over the Counter
LAMISIL AT 1 % CREAM	1	OTC Over the Counter
LAMISIL AT JOCK ITCH 1 % CREAM	1	OTC Over the Counter
naftifine hcl 1 % cream	1	
naftifine hcl 2 % cream	2	
nyamyc 100000 unit/gm powder	1	
nystatin 100000 unit/gm cream	1	
nystatin 100000 unit/gm ointment	1	
nystatin 100000 unit/gm powder	1	
nystop 100000 unit/gm powder	1	
qc athletes foot 1 % cream	1	OTC Over the Counter
qc athletes foot relief 1 % aerosol	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ra antifungal 1 % aerosol	1	OTC Over the Counter
ra antifungal foot care 1 % cream	1	OTC Over the Counter
ra foot care (terbinafine) 1 % cream	1	OTC Over the Counter
sm athletes foot 1 % cream	1	OTC Over the Counter
terbinafine hcl 1 % cream	1	OTC Over the Counter
tgt athletes foot 1 % cream	1	OTC Over the Counter
TINACTIN 1 % AEROSOL	1	OTC Over the Counter
TINACTIN 1 % CREAM	1	OTC Over the Counter
ting 1 % aerosol	1	OTC Over the Counter
ANTIFUNGALS - TOPICAL COMBINATIONS		
clotrimazole-betamethasone 1-0.05 % cream	1	
ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL		
VALCHLOR 0.016 % GEL	3	QL 90 / 30 day(s) S Specialty Drug
ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL		
FLUOROURACIL 2 % SOLUTION	1	
fluorouracil 5 % cream	1	
fluorouracil 5 % solution	1	
ANTIPSORIATICS		
calcipotriene 0.005 % cream	1	QL 60 / 30 day(s)
calcipotriene 0.005 % solution	1	QL 60 / 30 day(s)
tazarotene 0.1 % cream	1	QL 45 / 30 day(s) PA ST AL1 Up to 26 yrs old
VTAMA 1 % CREAM	1	QL 60 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPSORIATICS - SYSTEMIC		
acitretin 10 mg cap	2	QL 120 / 30 day(s)
acitretin 17.5 mg cap	2	QL 60 / 30 day(s)
acitretin 25 mg cap	2	QL 60 / 30 day(s)
STELARA 45 MG/0.5ML SOLN PRSYR	3	QL 0.5 / 84 day(s) PA S Specialty Drug
STELARA 45 MG/0.5ML SOLUTION	3	QL 0.5 / 84 day(s) PA S Specialty Drug
STELARA 90 MG/ML SOLN PRSYR	3	QL 1 / 56 day(s) PA S Specialty Drug
TREMFYA 100 MG/ML SOLN PEN	3	QL 1 / 56 day(s) PA AL1 At least 18 yrs old S Specialty Drug
TREMFYA 100 MG/ML SOLN PRSYR	3	QL 1 / 56 day(s) PA AL1 At least 18 yrs old S Specialty Drug
ANTISEBORRHEIC PRODUCTS		
DHS ZINC 2 % SHAMPOO	1	OTC Over the Counter
selenium sulfide 2.5 % lotion	1	
ANTIVIRALS - TOPICAL		
acyclovir 5 % ointment	1	QL 30 / 30 day(s) AL1 At least 12 yrs old
docosanol 10 % cream	1	OTC Over the Counter
ft docosanol 10 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gnp docosanol 10 % cream	1	OTC Over the Counter
hm docosanol 10 % cream	1	OTC Over the Counter
ASTRINGENTS		
AQUAPHOR 3 IN 1 DIAPER RASH 15 % CREAM	1	OTC Over the Counter
baby diaper rash 13 % cream	1	OTC Over the Counter
cvs quick relief diaper rash 13 % cream	1	OTC Over the Counter
desitin 13 % cream	1	OTC Over the Counter
DESITIN 40 % PASTE	1	OTC Over the Counter
desitin daily defense 13 % cream	1	OTC Over the Counter
DESITIN MAXIMUM STRENGTH 40 % PASTE	1	OTC Over the Counter
desitin rapid relief 13 % cream	1	OTC Over the Counter
gnp diaper rash 13 % cream	1	OTC Over the Counter
ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS		
CIBINQO 100 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
CIBINQO 200 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
CIBINQO 50 MG TAB	1	QL 30 / 30 day(s) PA S Specialty Drug
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
DUPIXENT 100 MG/0.67ML SOLN PRSYR	1	QL 2 / 28 day(s) PA S Specialty Drug
DUPIXENT 200 MG/1.14ML SOLN PEN	1	QL 2.28 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 200 MG/1.14ML SOLN PRSYR	1	QL 2.28 / 28 day(s) PA S Specialty Drug
DUPIXENT 300 MG/2ML SOLN PEN	1	QL 4 / 28 day(s) PA S Specialty Drug
DUPIXENT 300 MG/2ML SOLN PRSYR	1	QL 4 / 28 day(s) PA S Specialty Drug
BURN PRODUCTS		
silver sulfadiazine 1 % cream	1	
ssd 1 % cream	1	
CORTICOSTEROIDS - TOPICAL		
ala-cort 1 % cream	1	QL 454 / 30 day(s)
ala-cort 2.5 % cream	1	QL 454 / 30 day(s)
alclometasone dipropionate 0.05 % cream	1	QL 120 / 30 day(s)
alclometasone dipropionate 0.05 % ointment	1	QL 120 / 30 day(s)
anti-itch maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
aquanil hc 1 % lotion	1	OTC Over the Counter
aquaphor itch relief children 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
aquaphor itch relief max str 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
aveeno anti-itch max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
beta hc 1 % lotion	1	OTC Over the Counter
betamethasone dipropionate 0.05 % cream	1	QL 135 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
betamethasone dipropionate 0.05 % lotion	1	QL 120 / 30 day(s)
betamethasone dipropionate 0.05 % ointment	1	QL 135 / 30 day(s)
betamethasone dipropionate aug 0.05 % cream	1	QL 200 / 28 day(s)
betamethasone dipropionate aug 0.05 % lotion	1	QL 210 / 30 day(s)
betamethasone dipropionate aug 0.05 % ointment	1	QL 200 / 28 day(s)
betamethasone valerate 0.1 % cream	1	QL 135 / 30 day(s)
betamethasone valerate 0.1 % lotion	1	QL 120 / 30 day(s)
betamethasone valerate 0.1 % ointment	1	QL 135 / 30 day(s)
clobetasol prop emollient base 0.05 % cream	1	QL 210 / 28 day(s)
clobetasol propionate 0.05 % cream	1	QL 210 / 28 day(s)
clobetasol propionate 0.05 % gel	1	QL 210 / 28 day(s)
clobetasol propionate 0.05 % ointment	1	QL 210 / 28 day(s)
clobetasol propionate 0.05 % solution	1	QL 200 / 28 day(s)
clobetasol propionate e 0.05 % cream	1	QL 210 / 28 day(s)
cortaid maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 diabetics skin 1 % lotion	1	OTC Over the Counter
cortizone-10 eczema 1 % lotion	1	OTC Over the Counter
cortizone-10 hydratensive 1 % lotion	1	OTC Over the Counter
cortizone-10 intensive healing 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 intensve moisture 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 overnight 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cortizone-10 overnight itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 psoriasis 1 % lotion	1	OTC Over the Counter
cortizone-10 sensitive skin 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 soothing aloe 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 ultra soothing 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10 water resistant 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
cortizone-10/aloe 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
curad hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs anti-itch maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs cortisone intense healing 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs cortisone maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs cortisone maximum strength 1 % lotion	1	OTC Over the Counter
cvs cortisone maximum strength 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
cvs eczema anti-itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs hydrocortisone anti-itch 0.5 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs hydrocortisone anti-itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
cvs hydrocortisone max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
dermarest eczema 1 % lotion	1	OTC Over the Counter
desonide 0.05 % cream	1	QL 120 / 30 day(s)
desonide 0.05 % ointment	1	QL 120 / 30 day(s)
eq hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
eq hydrocortisone max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
eql anti-itch intensive heal 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
eql anti-itch maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
eql anti-itch maximum strength 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
FLUOCINOLONE ACETONIDE 0.01 % CREAM	1	QL 120 / 30 day(s)
fluocinolone acetonide 0.01 % cream	1	QL 120 / 30 day(s)
fluocinolone acetonide 0.01 % solution	1	QL 120 / 30 day(s)
fluocinolone acetonide 0.025 % cream	1	QL 120 / 30 day(s)
fluocinolone acetonide 0.025 % ointment	1	QL 120 / 30 day(s)
fluocinolone acetonide body 0.01 % oil	1	QL 119 / 30 day(s)
fluocinolone acetonide scalp 0.01 % oil	1	QL 119 / 30 day(s)
fluocinonide 0.05 % cream	1	QL 120 / 30 day(s)
fluocinonide 0.05 % gel	1	QL 120 / 30 day(s)
fluocinonide 0.05 % ointment	1	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluocinonide 0.05 % solution	1	QL 120 / 30 day(s)
fluticasone propionate 0.005 % ointment	1	QL 120 / 30 day(s)
fluticasone propionate 0.05 % cream	1	QL 120 / 30 day(s)
gnp hydrocortisone 0.5 % cream	1	OTC Over the Counter
gnp hydrocortisone max st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
gnp hydrocortisone plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
gnp hydrocortisone/aloe 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
goodsense anti-itch max str 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
goodsense anti-itch maximum st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
halobetasol propionate 0.05 % cream	1	QL 200 / 28 day(s)
hm hydrocortisone plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hm hydrocortisone-aloe max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone 0.5 % cream	1	OTC Over the Counter
hydrocortisone 0.5 % ointment	1	OTC Over the Counter
hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone 1 % lotion	1	OTC Over the Counter
hydrocortisone 1 % lotion	1	OTC Over the Counter
hydrocortisone 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocortisone 2.5 % cream	1	QL 454 / 30 day(s)
hydrocortisone 2.5 % lotion	1	QL 118 / 30 day(s)
hydrocortisone 2.5 % ointment	1	QL 454 / 30 day(s)
hydrocortisone anti-itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone anti-itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone max st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone max st/12 moist 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone ultra-moisture 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
hydrocortisone/aloe max str 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
instacort 5 0.5 % cream	1	OTC Over the Counter
kericort 10 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
kp hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
kp hydrocortisone max st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
kp hydrocortisone-aloe 0.5 % cream	1	OTC Over the Counter
medpura hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
meijer hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
mometasone furoate 0.1 % cream	1	QL 135 / 30 day(s)
mometasone furoate 0.1 % ointment	1	QL 135 / 30 day(s)
mometasone furoate 0.1 % solution	1	QL 120 / 30 day(s)
noble formula hc 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
px hydrocream 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
qc anti-itch aloe 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
qc anti-itch intensive healing 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
qc hydrocortisone max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
ra anti-itch maximum strength 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
ra anti-itch maximum strength 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
ra hydrocortisone plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
ra hydrocortisone plus 12 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
sarnol-hc 1 % lotion	1	OTC Over the Counter
sb hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
sb hydrocortisone max st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm hydrocortisone 0.5 % cream	1	OTC Over the Counter
sm hydrocortisone 0.5 % ointment	1	OTC Over the Counter
sm hydrocortisone 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
sm hydrocortisone max st 1 % ointment	1	QL 454 / 30 day(s) OTC Over the Counter
sm hydrocortisone plus 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
sm hydrocortisone-aloe max st 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
tgt anti-itch plus oatmeal 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
tgt anti-itch/aloe/vit e 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
triamcinolone acetonide 0.025 % cream	1	QL 454 / 30 day(s)
triamcinolone acetonide 0.025 % lotion	1	QL 120 / 30 day(s)
triamcinolone acetonide 0.025 % ointment	1	QL 454 / 30 day(s)
triamcinolone acetonide 0.1 % cream	1	QL 454 / 30 day(s)
triamcinolone acetonide 0.1 % lotion	1	QL 120 / 30 day(s)
triamcinolone acetonide 0.1 % ointment	1	QL 454 / 30 day(s)
triamcinolone acetonide 0.5 % cream	1	QL 454 / 30 day(s)
triamcinolone acetonide 0.5 % ointment	1	QL 120 / 30 day(s)
triderm 0.1 % cream	1	QL 454 / 30 day(s)
triderm 0.5 % cream	1	QL 454 / 30 day(s)
EMOLLIENTS		
A + D PERSONAL CARE LOTION LOTION	1	OTC Over the Counter
al12 12 % lotion	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALOE AFTERSUN LOTION	1	OTC Over the Counter
amlactin 12 % lotion	1	OTC Over the Counter
amlactin daily 12 % lotion	1	OTC Over the Counter
AMLACTIN RAPID RELIEF 15 % LOTION	1	OTC Over the Counter
ammonium lactate 12 % cream	1	
ammonium lactate 12 % lotion	1	OTC Over the Counter
AQUA GLYCOLIC HAND/BODY LOTION	1	OTC Over the Counter
AQUA LACTEN LOTION	1	OTC Over the Counter
AQUAMED LOTION	1	OTC Over the Counter
AQUAPHILIC OINTMENT	1	OTC Over the Counter
AQUAPHOR OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV HEALING BABY 41 % OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV PROTECT HEALING OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV PROTECT HEALING 41 % OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV THERAPY CHILDRENS 41 % OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV THERAPY HEALING OINTMENT	1	OTC Over the Counter
AQUAPHOR ADV THERAPY HEALING 41 % OINTMENT	1	OTC Over the Counter
AQUAPHOR ADVANCED THERAPY OINTMENT	1	OTC Over the Counter
AQUAPHOR ADVANCED THERAPY 41 % OINTMENT	1	OTC Over the Counter
AQUAPHOR ADVANCED THERAPY BABY OINTMENT	1	OTC Over the Counter
AVEENO DAILY MOISTURIZING LOTION	1	OTC Over the Counter
AVEENO STRESS RELIEF LOTION	1	OTC Over the Counter
AVEENO STRESS RELIEF LOTION	1	OTC Over the Counter
BAG BALM OINTMENT	1	OTC Over the Counter
BEAUTY 360 ADVANCED SKIN CARE LOTION	1	OTC Over the Counter
BETA CARE LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOUDREAUXS BABY BUTT SMOOTH OINTMENT	1	OTC Over the Counter
CAM LOTION	1	OTC Over the Counter
CERAVE LOTION	1	OTC Over the Counter
CERAVE AM SPF 30 LOTION	1	OTC Over the Counter
CERAVE DAILY MOISTURIZING LOTION	1	OTC Over the Counter
CERAVE HEALING OINTMENT	1	OTC Over the Counter
CERAVE PM LOTION	1	OTC Over the Counter
CERAVE SA ROUGH & BUMPY SKIN LOTION	1	OTC Over the Counter
CETAPHIL ADVANCED RELIEF LOTION	1	OTC Over the Counter
CETAPHIL DAILY ADVANCE LOTION	1	OTC Over the Counter
CETAPHIL DAILY ADVANCE LOTION	1	OTC Over the Counter
CETAPHIL DAILY FACIAL SPF 15 LOTION	1	OTC Over the Counter
CETAPHIL DERMACONTROL/SPF 30 LOTION	1	OTC Over the Counter
CETAPHIL MOISTURIZING LOTION	1	OTC Over the Counter
CETAPHIL RESTORADERM LOTION	1	OTC Over the Counter
CLN FACIAL MOISTURIZER NOURISH LOTION	1	OTC Over the Counter
COCOA BUTTER LOTION	1	OTC Over the Counter
COCOA BUTTER HAND & BODY LOTION	1	OTC Over the Counter
CORN HUSKERS LOTION	1	OTC Over the Counter
CVS BEAUTY 360 DRY SKIN LOTION	1	OTC Over the Counter
CVS DAILY ULTRA MOISTURE LOTION	1	OTC Over the Counter
CVS DRY SKIN THERAPY LOTION	1	OTC Over the Counter
CVS GENTLE SKIN CLEANSER LOTION	1	OTC Over the Counter
cvs hydrating skin treatment 12 % lotion	1	OTC Over the Counter
CVS MOISTURIZING LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs skin treatment 12 % lotion	1	OTC Over the Counter
DAILY CONDITIONING TREATMENT OINTMENT	1	OTC Over the Counter
DAILY MOISTURIZING LOTION	1	OTC Over the Counter
DERMAL THERAPY EXTRA STRENGTH 10 % LOTION	1	OTC Over the Counter
DERMAL THERAPY FACE CARE 1 % LOTION	1	OTC Over the Counter
DERMAL THERAPY FOOT MASSAGE 1 % LOTION	1	OTC Over the Counter
DERMAL THERAPY HAND/ELBOW 15 % LOTION	1	OTC Over the Counter
DERMAL THERAPY HEEL CARE 25 % LOTION	1	OTC Over the Counter
DERMEND ALPHA + BETA HYDROXY LOTION	1	OTC Over the Counter
DIABETIDERM LOTION	1	OTC Over the Counter
DIABETIDERM HAND & BODY LOTION	1	OTC Over the Counter
EMOLLIA-LOTION LOTION	1	OTC Over the Counter
EPILYT LOTION	1	OTC Over the Counter
EQL ADVANCED RECOVERY LOTION	1	OTC Over the Counter
EQL ULTRA MOISTURIZING DAILY LOTION	1	OTC Over the Counter
EUCERIN LOTION	1	OTC Over the Counter
EUCERIN BABY LOTION	1	OTC Over the Counter
EUCERIN DAILY HYDRATION LOTION	1	OTC Over the Counter
EUCERIN DAILY HYDRATION SPF15 LOTION	1	OTC Over the Counter
EUCERIN DAILY PROTECTION/SPF30 LOTION	1	OTC Over the Counter
EUCERIN INTENSIVE REPAIR LOTION	1	OTC Over the Counter
EUCERIN INTENSIVE REPAIR OINTMENT	1	OTC Over the Counter
EUCERIN ORIGINAL HEALING LOTION	1	OTC Over the Counter
EUCERIN PLUS 5-5 % LOTION	1	OTC Over the Counter
EUCERIN PROFESSIONAL REPAIR LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EUCERIN ROUGHNESS RELIEF LOTION	1	OTC Over the Counter
EUCERIN SMOOTHING REPAIR LOTION	1	OTC Over the Counter
geri-hydrolac 12 12 % lotion	1	OTC Over the Counter
geri-hydrolac 12 12 % lotion	1	OTC Over the Counter
GOLD BOND ADVANCED HEALING 45 % OINTMENT	1	OTC Over the Counter
GOLD BOND EVERYDAY MOISTURE LOTION	1	OTC Over the Counter
GOLD BOND HEALING LOTION	1	OTC Over the Counter
GOLD BOND MEDICATED BODY 5-0.15 % LOTION	1	OTC Over the Counter
GOLD BOND MEDICATED BODY 5-0.15 % LOTION	1	OTC Over the Counter
GOLD BOND MEDICATED BODY EX ST 0.5 % LOTION	1	OTC Over the Counter
GOLD BOND MEDICATED BODY EX ST 5-0.5 % LOTION	1	OTC Over the Counter
GOLD BOND PURE MOISTURE LOTION	1	OTC Over the Counter
GOLD BOND ULT SHEER RIBBONS LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE HEALING LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE HEALING OINTMENT	1	OTC Over the Counter
GOLD BOND ULTIMATE OVERNIGHT LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE PROTECTION LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE RESTORING LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE SOFTENING LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE SOFTENING LOTION	1	OTC Over the Counter
GOLD BOND ULTIMATE SOOTHING LOTION	1	OTC Over the Counter
HYDRAZONE LOTION LOTION	1	OTC Over the Counter
JOHNSONS SKIN NOURISH LOTION	1	OTC Over the Counter
JOHNSONS SKIN NOURISH MOIST LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KERI ADVANCED MOISTURE THERAPY LOTION	1	OTC Over the Counter
KERI BASIC ESSENTIALS LOTION	1	OTC Over the Counter
KERI NOURISHING SHEA BUTTER LOTION	1	OTC Over the Counter
KERI ORIGINAL LOTION	1	OTC Over the Counter
KERI ORIGINAL DAILY MOISTURE LOTION	1	OTC Over the Counter
KERI OVERNIGHT LOTION	1	OTC Over the Counter
KERI RENEWAL MILK BODY LOTION	1	OTC Over the Counter
KERI RENEWAL SKIN FIRMING LOTION	1	OTC Over the Counter
KERI RENEWAL STRETCH MARK LOTION	1	OTC Over the Counter
KERI SENSITIVE SKIN LOTION	1	OTC Over the Counter
LANAPHILIC OINTMENT	1	OTC Over the Counter
LUBRIDERM LOTION	1	OTC Over the Counter
LUBRIDERM ADVANCED THERAPY LOTION	1	OTC Over the Counter
LUBRIDERM DAILY MOISTURE LOTION	1	OTC Over the Counter
LUBRIDERM INTENSE SKIN REPAIR LOTION	1	OTC Over the Counter
LUBRIDERM MENS 3-IN-1 LOTION	1	OTC Over the Counter
LUBRIDERM SERIOUSLY SENSITIVE LOTION	1	OTC Over the Counter
LUBRIDERM SKIN NOURISHING LOTION	1	OTC Over the Counter
LUBRISOFT LOTION	1	OTC Over the Counter
MAXAM LOTION	1	OTC Over the Counter
MEDERMA AG HAND & BODY LOTION	1	OTC Over the Counter
MOTHERS FRIEND LOTION	1	OTC Over the Counter
MSM SKIN LOTION	1	OTC Over the Counter
NEUTROGENA BODY LOTION	1	OTC Over the Counter
NEUTROGENA HEALTHY SKIN FACE LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEUTROGENA MOISTURE SENS SKIN LOTION	1	OTC Over the Counter
NIVEA LOTION	1	OTC Over the Counter
NIVEA ESSENTIALLY ENRICHED LOTION	1	OTC Over the Counter
NIVEA IN-SHOWER LOTION	1	OTC Over the Counter
NIVEA INTENSE HEALING LOTION	1	OTC Over the Counter
NIVEA ORIGINAL MOISTURE LOTION	1	OTC Over the Counter
NIVEA SHEA NOURISH LOTION	1	OTC Over the Counter
NIVEA VISAGE LOTION	1	OTC Over the Counter
NUTRADERM LOTION	1	OTC Over the Counter
NUTRADERM ADVANCED FORMULA LOTION	1	OTC Over the Counter
OINTMENT BASE OINTMENT	1	OTC Over the Counter
PALMERS COCOA BUTTER FORMULA LOTION	1	OTC Over the Counter
PALMERS COCONUT OIL BODY LOTION	1	OTC Over the Counter
PALMERS STRETCH MARKS LOTION	1	OTC Over the Counter
RA ADVANCED HEALING OINTMENT	1	OTC Over the Counter
RA DAYLOGIC HEALING DRY SKIN LOTION	1	OTC Over the Counter
RA RENEWAL DRY SKIN THERAPY LOTION	1	OTC Over the Counter
RADIAGUARD ADVANCED LOTION	1	OTC Over the Counter
RESTA LITE LOTION	1	OTC Over the Counter
RESTA LITE LOTION	1	OTC Over the Counter
ROC DEEP WRINKLE SERUM LOTION	1	OTC Over the Counter
ROSE MILK LOTION	1	OTC Over the Counter
SKIN REPAIR LOTION	1	OTC Over the Counter
SOOTHE & COOL MOISTURIZING LOTION	1	OTC Over the Counter
ST IVES SWISS FORMULA MOISTURE LOTION	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STUDIO 35 EXTRA MOISTURIZING LOTION	1	OTC Over the Counter
THERABETIC SKIN CARE LOTION	1	OTC Over the Counter
THERAPLEX HYDROLOTION LOTION	1	OTC Over the Counter
VANICREAM LOTION	1	OTC Over the Counter
VANICREAM OINTMENT	1	OTC Over the Counter
WIBI LOTION	1	OTC Over the Counter
ENZYMES - TOPICAL		
SANTYL 250 UNIT/GM OINTMENT	2	QL 30 / 30 day(s)
IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL		
anti-fungal 1 % cream	1	OTC Over the Counter
antifungal (clotrimazole) 1 % cream	1	OTC Over the Counter
antifungal 2 % powder	1	OTC Over the Counter
antifungal clotrimazole 1 % cream	1	OTC Over the Counter
athletes foot (clotrimazole) 1 % cream	1	OTC Over the Counter
athletes foot 2 % powder	1	OTC Over the Counter
clotrimazole 1 % cream	1	OTC Over the Counter
clotrimazole 1 % solution	1	
clotrimazole af 1 % cream	1	OTC Over the Counter
clotrimazole anti-fungal 1 % cream	1	OTC Over the Counter
clotrimazole athletes foot 1 % cream	1	OTC Over the Counter
cvs clotrimazole 1 % cream	1	OTC Over the Counter
cvs itch relief 1 % cream	1	OTC Over the Counter
cvs ringworm 1 % cream	1	OTC Over the Counter
desenex 1 % cream	1	OTC Over the Counter
desenex 2 % powder	1	OTC Over the Counter
econazole nitrate 1 % cream	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq antifungal 1 % cream	1	OTC Over the Counter
eq athletes foot 1 % cream	1	OTC Over the Counter
eq jock itch 1 % cream	1	OTC Over the Counter
eql athletes foot 1 % cream	1	OTC Over the Counter
ft athletes foot (clotrimaz) 1 % cream	1	OTC Over the Counter
gnp athletes foot 1 % cream	1	OTC Over the Counter
gnp miconazorb af 2 % powder	1	OTC Over the Counter
goodsense athletes foot 1 % cream	1	OTC Over the Counter
jock itch 1 % cream	1	OTC Over the Counter
jock itch relief 1 % cream	1	OTC Over the Counter
ketoconazole 2 % cream	1	
ketoconazole 2 % shampoo	1	
kp clotrimazole 1 % cream	1	OTC Over the Counter
lotrimin af 2 % powder	1	OTC Over the Counter
miconazorb af 2 % powder	1	OTC Over the Counter
micotrin ac 1 % cream	1	OTC Over the Counter
micotrin ap 2 % powder	1	OTC Over the Counter
micro guard 2 % powder	1	OTC Over the Counter
mycozyl ac 1 % cream	1	OTC Over the Counter
mycozyl ap 2 % powder	1	OTC Over the Counter
NIZORAL 1 % SHAMPOO	1	OTC Over the Counter
NIZORAL A-D 1 % SHAMPOO	1	OTC Over the Counter
pro-ex antifungal 1 % cream	1	OTC Over the Counter
px athletic foot 1 % cream	1	OTC Over the Counter
qc clotrimazole 1 % cream	1	OTC Over the Counter
ra athletes foot 1 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ra clotrimazole 1 % cream	1	OTC Over the Counter
ra jock itch 1 % cream	1	OTC Over the Counter
remedy antifungal 2 % powder	1	OTC Over the Counter
remedy phytoplex antifungal 2 % powder	1	OTC Over the Counter
sb clotrimazole foot 1 % cream	1	OTC Over the Counter
shopko athletes foot 1 % cream	1	OTC Over the Counter
sm antifungal clotrimazole 1 % cream	1	OTC Over the Counter
tgt clotrimazole 1 % cream	1	OTC Over the Counter
tm-clotrimazole 1 % cream	1	OTC Over the Counter
zeasorb-af 2 % powder	1	OTC Over the Counter
IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL		
imiquimod 5 % cream	1	QL 24 / 30 day(s) AL1 At least 12 yrs old
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
clean & clear acne scrub 2 % gel	1	OTC Over the Counter
clean & clear acne treatment 2 % gel	1	OTC Over the Counter
clean & clear advantage mark 2 % gel	1	OTC Over the Counter
CLEAR AWAY 1-STEP WART REMOVER 40 % PAD	1	OTC Over the Counter
CLEAR AWAY PLANTAR SYSTEM 40 % PAD	1	OTC Over the Counter
CLEARASIL DAILY CLEAN 1 % LIQUID	1	OTC Over the Counter
CORN REMOVER ONE STEP 40 % PAD	1	OTC Over the Counter
cvs advanced acne spot treat 2 % gel	1	OTC Over the Counter
cvs medicated spot 2 % gel	1	OTC Over the Counter
neutrogena blackhead eliminat 2 % gel	1	OTC Over the Counter
PODOFILOX 0.5 % SOLUTION	1	
podofilox 0.5 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOCAL ANESTHETICS - TOPICAL		
anecream 4 % cream	1	OTC Over the Counter
aspercreme lidocaine 4 % cream	1	OTC Over the Counter
aspercreme lidocaine 4 % patch	1	OTC Over the Counter
aspercreme w/lidocaine 4 % cream	1	OTC Over the Counter
asperflex lidocaine 4 % cream	1	OTC Over the Counter
asperflex max st 4 % patch	1	OTC Over the Counter
asperflex pain relieving 4 % patch	1	OTC Over the Counter
bengay lidocaine 4 % cream	1	OTC Over the Counter
blue tube/ aloe 4 % cream	1	OTC Over the Counter
blue-emu pain relief dry 4 % patch	1	OTC Over the Counter
capsaicin 0.1 % cream	1	OTC Over the Counter
capsaicin hp 0.1 % cream	1	OTC Over the Counter
capsaicin pain relief 0.1 % cream	1	OTC Over the Counter
capzix 0.1 % cream	1	OTC Over the Counter
cvs capsaicin hp 0.1 % cream	1	OTC Over the Counter
cvs lidocaine maximum strength 4 % cream	1	OTC Over the Counter
cvs pain relief 4 % cream	1	OTC Over the Counter
cvs pain relief 4 % patch	1	OTC Over the Counter
eq lidocaine pain relieving 4 % patch	1	OTC Over the Counter
eq pain relieving 4 % cream	1	OTC Over the Counter
first care pain relief 4 % patch	1	OTC Over the Counter
ft pain relief max strength 4 % patch	1	OTC Over the Counter
glydo 2 % prsyr	1	QL 900 / 30 day(s) PA
gnp lidocaine pain relief 4 % patch	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gnp lidocaine pain relieving 4 % cream	1	OTC Over the Counter
gold bond multi-symptom 4 % cream	1	OTC Over the Counter
gold bond pain & itch relief 4 % cream	1	OTC Over the Counter
healthwise pain relief 4 % patch	1	OTC Over the Counter
hm lidocaine patch 4 % patch	1	OTC Over the Counter
lido king 4 % patch	1	OTC Over the Counter
lidocaine 4 % cream	1	OTC Over the Counter
lidocaine 4 % patch	1	OTC Over the Counter
lidocaine 5 % cream	1	OTC Over the Counter
lidocaine 5 % ointment	1	QL 600 / 30 days PA
lidocaine 5 % patch	2	QL 90 / 30 days PA
lidocaine hcl 4 % cream	1	OTC Over the Counter
lidocaine hcl 4 % solution	1	QL 400 / 30 day(s) PA
lidocaine hcl urethral/mucosal 2 % prsyr	1	QL 900 / 30 day(s) PA
lidocaine max st 24 hours 4 % patch	1	OTC Over the Counter
lidocaine pain relief 4 % patch	1	OTC Over the Counter
lidocaine pain relief max st 4 % cream	1	OTC Over the Counter
lidocaine pain relief max st 4 % patch	1	OTC Over the Counter
lidocaine pain relieving 4 % patch	1	OTC Over the Counter
lidocaine plus 4 % cream	1	OTC Over the Counter
lidocan 5 % patch	2	QL 90 / 30 days PA
lidocanna 4 % patch	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lidocore 4 % patch	1	OTC Over the Counter
lidofore flexipatch 4 % patch	1	OTC Over the Counter
neuromed7 4 % cream	1	OTC Over the Counter
pain relief maximum strength 4 % patch	1	OTC Over the Counter
pain relieving + lidocaine 4 % cream	1	OTC Over the Counter
pain relieving 4 % cream	1	OTC Over the Counter
pain relieving lidocaine 4 % patch	1	OTC Over the Counter
pharmacist choice lidocaine 4 % patch	1	OTC Over the Counter
pharmacist choice pain relief 4 % patch	1	OTC Over the Counter
premium lidocaine 5 % ointment	1	QL 600 / 30 days PA
qc lidocaine pain relief 4 % patch	1	OTC Over the Counter
qc pain relieving + lidocaine 4 % cream	1	OTC Over the Counter
ra lidocaine pain relieving 4 % patch	1	OTC Over the Counter
ra pain relief 4 % cream	1	OTC Over the Counter
ra pain relief 4 % cream	1	OTC Over the Counter
ra pain relieving 4 % patch	1	OTC Over the Counter
re-lieved maximum strength 4 % patch	1	OTC Over the Counter
salonpas pain relieving 4 % patch	1	OTC Over the Counter
theracare pain relief 4 % patch	1	OTC Over the Counter
tridacaine 5 % patch	2	QL 90 / 30 days PA
welmate lidocaine pain reliev 4 % patch	1	OTC Over the Counter
xolido xp 4 % cream	1	OTC Over the Counter
zostrix hp 0.1 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL		
pimecrolimus 1 % cream	1	QL 100 / 30 days AL1 At least 2 yrs old
tacrolimus 0.03 % ointment	1	QL 100 / 30 day(s) AL1 At least 2 yrs old
tacrolimus 0.1 % ointment	1	QL 100 / 30 day(s) AL1 At least 16 yrs old
MISC. TOPICAL		
b-sure witch hazel 50 % pad	1	OTC Over the Counter
cvs medicated wipes 50 % pad	1	OTC Over the Counter
cvs medicated witch hazel 50 % pad	1	OTC Over the Counter
eq hemorrhoidal 50 % pad	1	OTC Over the Counter
eq hygienic cleansing wipes pad	1	OTC Over the Counter
goodsense medicated 50 % pad	1	OTC Over the Counter
goodsense medicated wipes 50 % pad	1	OTC Over the Counter
hemorrhoidal 50 % pad	1	OTC Over the Counter
hemorrhoidal hygiene 50 % pad	1	OTC Over the Counter
hm medicated cooling 50 % pad	1	OTC Over the Counter
medi-pads 50 % pad	1	OTC Over the Counter
medicated cleansing 50 % pad	1	OTC Over the Counter
medicated pads 50 % pad	1	OTC Over the Counter
medicated wipes 50 % pad	1	OTC Over the Counter
pre-moistened witch hazel 50 % pad	1	OTC Over the Counter
preparation h 50 % pad	1	OTC Over the Counter
preparation h for women 20 % pad	1	OTC Over the Counter
preparation h soothing relief 20 % pad	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
preparation h totables wipes 50 % pad	1	OTC Over the Counter
qc medicated pads pad	1	OTC Over the Counter
qc medicated pre-moistened 50 % pad	1	OTC Over the Counter
qc medicated wipes pad	1	OTC Over the Counter
ra medicated wipes 50 % pad	1	OTC Over the Counter
sm medicated wipes 50 % pad	1	OTC Over the Counter
tgt medicated hemorrhoidal pad	1	OTC Over the Counter
tgt medicated wipe/witch hazel 50 % pad	1	OTC Over the Counter
tn dickinsons witch hazel pad	1	OTC Over the Counter
tn dickinsons witch hazel 50 % pad	1	OTC Over the Counter
MISC. TOPICAL COMBINATIONS		
CALAMINE 8-8 % LOTION	1	OTC Over the Counter
CALAMINE-ZINC OXIDE LOTION	1	OTC Over the Counter
CALAMINE-ZINC OXIDE 8-8 % LOTION	1	OTC Over the Counter
GNP CALAMINE 8-8 % LOTION	1	OTC Over the Counter
HM CALAMINE 8-8 % LOTION	1	OTC Over the Counter
MEIJER CALAMINE LOTION	1	OTC Over the Counter
PX CALAMINE LOTION	1	OTC Over the Counter
SM CALAMINE LOTION	1	OTC Over the Counter
NIT REMOVERS		
FT ULTRA LICE TREATMENT SYSTEM KIT	1	OTC Over the Counter
NIX ULTRA KIT	1	OTC Over the Counter
NIX ULTRA 2-IN-1 LICE SYSTEM KIT	1	OTC Over the Counter
NIX ULTRA LICE REMOVAL KIT 0.25 % KIT	1	OTC Over the Counter
NIX ULTRA SHAMPOO ALL-IN-ONE KIT	1	OTC Over the Counter
RID SUPER MAX 4 IN 1 LICE ELIM KIT	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RID SUPER MAX 5 IN 1 LICE ELIM KIT	1	OTC Over the Counter
RID SUPER MAX SENSITIVE SKIN KIT	1	OTC Over the Counter
ROSACEA AGENTS		
azelaic acid 15 % gel	1	QL 50 / 30 day(s)
metronidazole 0.75 % gel	1	
metronidazole 0.75 % lotion	1	
metronidazole 1 % gel	1	
rosadan 0.75 % gel	1	
SCABICIDE COMBINATIONS		
cvs lice killing 0.33-4 % shampoo	1	OTC Over the Counter
eq lice killing max st 0.33-4 % shampoo	1	OTC Over the Counter
eql lice killing max st 0.33-4 % shampoo	1	OTC Over the Counter
ft lice killing max st 0.33-4 % shampoo	1	OTC Over the Counter
gnp lice treatment 0.33-4 % shampoo	1	OTC Over the Counter
goodsense lice killing max str 0.33-4 % shampoo	1	OTC Over the Counter
hm lice killing max st 0.33-4 % shampoo	1	OTC Over the Counter
lice killing 0.33-4 % shampoo	1	OTC Over the Counter
lice killing 4-0.33 % shampoo	1	OTC Over the Counter
lice killing maximum strength 0.33-4 % shampoo	1	OTC Over the Counter
lice killing shampoo max str 0.33-4 % shampoo	1	OTC Over the Counter
ra lice maximum strength 0.33-4 % shampoo	1	OTC Over the Counter
RID 0.33-4 % LIQUID	1	OTC Over the Counter
RID COMPLETE LICE ELIMINATION KIT	1	OTC Over the Counter
rid lice killing shampoo 0.33-4 % shampoo	1	OTC Over the Counter
sb lice killing max st 0.33-4 % shampoo	1	OTC Over the Counter
sm lice killing max strength 0.33-4 % shampoo	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SCABICIDES & PEDICULICIDES		
cvs lice treatment 1 % liquid	1	OTC Over the Counter
gnp lice treatment 1 % liquid	1	OTC Over the Counter
goodsense lice killing 1 % liquid	1	OTC Over the Counter
hm lice treatment 1 % liquid	1	OTC Over the Counter
IVERMECTIN 0.5 % LOTION	2	QL 2 / 30 day(s) ST
lice treatment 1 % liquid	1	OTC Over the Counter
lice treatment creme rinse 1 % liquid	1	OTC Over the Counter
malathion 0.5 % lotion	1	QL 2 / 30 day(s) ST
NATROBA 0.9 % SUSPENSION	2	QL 2 / 30 day(s) ST
NIX CREME RINSE 1 % LIQUID	1	OTC Over the Counter
permethrin 5 % cream	1	QL 2 / 30 day(s) ST
ra lice treatment 1 % liquid	1	OTC Over the Counter
sb lice treatment 1 % liquid	1	OTC Over the Counter
sm lice treatment 1 % liquid	1	OTC Over the Counter
SPINOSAD 0.9 % SUSPENSION	2	QL 2 / 30 day(s) ST
SOAPS		
ACNE-AID BAR	1	OTC Over the Counter
AVEENO MOISTURIZING BAR	1	OTC Over the Counter
BASIS ALL CLEAR BAR	1	OTC Over the Counter
BASIS COMBINATION BAR	1	OTC Over the Counter
BASIS EXTRA DRY BAR	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BASIS NORMAL/DRY BAR	1	OTC Over the Counter
BASIS SENSITIVE SKIN BAR	1	OTC Over the Counter
CETAPHIL GENTLE CLEANSING BAR	1	OTC Over the Counter
CONTI CASTILE SOAP BAR	1	OTC Over the Counter
EQL DEODORANT SOAP BAR	1	OTC Over the Counter
EQL MOISTURIZING BEAUTY BAR	1	OTC Over the Counter
EUCERIN BAR	1	OTC Over the Counter
GRANDPAS BAKING SODA SOAP BAR	1	OTC Over the Counter
GRANDPAS INDIAN CORN SOAP BAR	1	OTC Over the Counter
GRANDPAS LOVE MY LOOFAH SOAP BAR	1	OTC Over the Counter
GRANDPAS OATMEAL SOAP BAR	1	OTC Over the Counter
GRANDPAS ORANGE ESSENCE SOAP BAR	1	OTC Over the Counter
GRANDPAS PATCHOULI SOAP BAR	1	OTC Over the Counter
GRANDPAS SHEA BUTTER SOAP BAR	1	OTC Over the Counter
GRANDPAS WITCH HAZEL SOAP BAR	1	OTC Over the Counter
JOHNSONS BABY BAR BAR	1	OTC Over the Counter
LOBOB CONTACT LENS WEARER SOAP BAR	1	OTC Over the Counter
LOWILA BAR	1	OTC Over the Counter
NATURE DE FRANCE ALGOLI SOAP BAR	1	OTC Over the Counter
NATURE DE FRANCE ARGILE SOAP BAR	1	OTC Over the Counter
NATURE DE FRANCE ARGIMIEL SOAP BAR	1	OTC Over the Counter
NEUTROGENA ACNE CLEANSING SOAP BAR	1	OTC Over the Counter
NEUTROGENA FACIAL SOAP BAR	1	OTC Over the Counter
OILATUM 7.5 % BAR	1	OTC Over the Counter
RA BEAUTY BAR BAR	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAYMAN LANOLIN BAR	1	OTC Over the Counter
SAYMAN WITCH HAZEL BAR	1	OTC Over the Counter
SUMMERS EVE NIGHT-TIME BAR	1	OTC Over the Counter
VANICREAM BAR	1	OTC Over the Counter
TAR PRODUCTS		
DHS TAR 0.5 % SHAMPOO	1	OTC Over the Counter
DHS TAR GEL 0.5 % SHAMPOO	1	OTC Over the Counter
NEUTROGENA T/GEL 0.5 % SHAMPOO	1	OTC Over the Counter
NEUTROGENA T/GEL STUBBORN ITCH 0.5 % SHAMPOO	1	OTC Over the Counter
TOPICAL ANESTHETIC COMBINATIONS		
lidocaine-prilocaine 2.5-2.5 % cream	1	QL 30 / 30 day(s) PA
WOUND CARE - GROWTH FACTOR AGENTS		
REGRANEX 0.01 % GEL	3	QL 30 / 30 day(s)
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
CHEMSTRIP K STRIP	1	QL 200 / 30 day(s) OTC Over the Counter
KETONE TEST STRIP	1	QL 200 / 30 day(s) OTC Over the Counter
KETOSTIX STRIP	1	QL 200 / 30 day(s) OTC Over the Counter
ONETOUCH ULTRA STRIP	1	QL 204 / 30 day(s) OTC Over the Counter
ONETOUCH ULTRA TEST STRIP	1	QL 204 / 30 day(s) OTC Over the Counter
ONETOUCH VERIO STRIP	1	QL 204 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELION KETONE TEST STRIP	1	QL 200 / 30 day(s) OTC Over the Counter
INFECTION TESTS		
ADVIN COVID-19 ANTIGEN TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
BD VERITOR HOME COVID-19 TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
BINAXNOW COVID-19 AG HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
CARESTART COVID-19 HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
CLEARDETECT COVID-19 AG HOME KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
CLINITEST RAPID COVID-19 TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
COVID-19 AT HOME ANTIGEN TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
COVID-19 AT-HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
COVID-19 OTC ANTIGEN 1-PACK KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COVID-19 OTC ANTIGEN 2-PACK KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
CVS COVID-19 AT HOME TEST KIT KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
DIATRUST COVID-19 HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
ELLUME COVID-19 HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
FASTEP COVID-19 ANTIGEN TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
FLOWFLEX COVID-19 AG HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
GENABIO COVID-19 RAPID TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
GOTOKNOW COVID-19 ANTIGEN RAPI KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
ID NOW COVID-19 2.0 CONTROL KIT	1	
ID NOW COVID-19 2.0 TEST KIT	1	
IHEALTH COVID-19 RAPID TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
INDICAID COVID-19 RAPID TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTELISWAB COVID-19 RAPID TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
ON/GO COVID-19 ANTIGEN TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
ON/GO ONE COVID-19 HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
PILOT COVID-19 AT-HOME TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
QUICKVUE AT-HOME COVID-19 TEST KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
SPEEDY SWAB COVID-19 ANTIGEN KIT	1	QL 8 / 30 days QLC 8 / 30 day(s) OTC Over the Counter
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
DIETARY MANAGEMENT PRODUCT COMBINATIONS		
ELFOLATE PLUS 3-35-2 MG TAB	1	
FOLTANX 3-35-2 MG TAB	1	
PODIAPN CAP	1	
WESTAB MAX 2.5-25-2 MG TAB	1	
INFANT FOODS		
PHENYL-FREE 1 POWDER	2	OTC Over the Counter
NUTRITIONAL SUPPLEMENTS		
PKU 2 POWDER	2	OTC Over the Counter
PKU 3 POWDER	2	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PKU AIR15 GOLD LIQUID	2	OTC Over the Counter
PKU AIR15 GREEN LIQUID	2	OTC Over the Counter
PKU AIR15 YELLOW LIQUID	2	OTC Over the Counter
PKU AIR20 GOLD LIQUID	2	OTC Over the Counter
PKU AIR20 GREEN LIQUID	2	OTC Over the Counter
PKU AIR20 YELLOW LIQUID	2	OTC Over the Counter
PKU COOLER 10 LIQUID	2	OTC Over the Counter
PKU COOLER 15 LIQUID	2	OTC Over the Counter
PKU COOLER 20 LIQUID	2	OTC Over the Counter
PKU EASY MICROTABS TAB DR	2	
PKU LOPHLEX LQ 20 LIQUID	2	OTC Over the Counter
PKU PERIFLEX EARLY YEARS POWDER	2	OTC Over the Counter
PKU PERIFLEX JUNIOR PLUS POWDER	2	OTC Over the Counter
PKU SPHERE 20 LIQUID	2	OTC Over the Counter
PKU TRIO POWDER	2	OTC Over the Counter
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 12000-38000 UNIT CP DR PART	1	
CREON 24000-76000 UNIT CP DR PART	1	
CREON 3000-9500 UNIT CP DR PART	1	
CREON 36000-114000 UNIT CP DR PART	1	
CREON 6000-19000 UNIT CP DR PART	1	
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
acetazolamide 125 mg tab	1	
acetazolamide 250 mg tab	1	
acetazolamide er 500 mg cap er 12h	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIURETIC COMBINATIONS		
ALDACTAZIDE 50-50 MG TAB	2	
AMILORIDE-HYDROCHLOROTHIAZIDE 5-50 MG TAB	1	
amiloride-hydrochlorothiazide 5-50 mg tab	1	
spironolactone-hctz 25-25 mg tab	1	
triamterene-hctz 37.5-25 mg cap	1	
triamterene-hctz 37.5-25 mg tab	1	
triamterene-hctz 75-50 mg tab	1	
LOOP DIURETICS		
bumetanide 0.5 mg tab	1	
bumetanide 1 mg tab	1	
bumetanide 2 mg tab	1	
ethacrynic acid 25 mg tab	2	
furosemide 10 mg/ml solution	1	
furosemide 20 mg tab	1	
furosemide 40 mg tab	1	
furosemide 80 mg tab	1	
torsemide 10 mg tab	1	
torsemide 100 mg tab	1	
torsemide 20 mg tab	1	
torsemide 5 mg tab	1	
POTASSIUM SPARING DIURETICS		
amiloride hcl 5 mg tab	1	
spironolactone 100 mg tab	1	
spironolactone 25 mg tab	1	
spironolactone 50 mg tab	1	
triamterene 100 mg cap	2	
triamterene 50 mg cap	2	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
chlorthalidone 25 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
chlorthalidone 50 mg tab	1	
DIURIL 250 MG/5ML SUSPENSION	1	
hydrochlorothiazide 12.5 mg cap	1	
hydrochlorothiazide 12.5 mg tab	1	
hydrochlorothiazide 25 mg tab	1	
hydrochlorothiazide 50 mg tab	1	
indapamide 1.25 mg tab	1	
indapamide 2.5 mg tab	1	
metolazone 10 mg tab	1	
metolazone 2.5 mg tab	1	
metolazone 5 mg tab	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BISPHOSPHONATES		
alendronate sodium 10 mg tab	1	QL 30 / 30 day(s)
alendronate sodium 35 mg tab	1	QL 5 / 30 day(s)
alendronate sodium 70 mg tab	1	QL 5 / 30 day(s)
alendronate sodium 70 mg/75ml solution	1	QL 5 / 30 day(s)
ibandronate sodium 150 mg tab	1	QL 1.2 / 30 day(s)
risedronate sodium 150 mg tab	1	QL 1.2 / 30 day(s)
risedronate sodium 30 mg tab	1	QL 30 / 30 day(s)
risedronate sodium 35 mg tab	1	QL 5 / 30 day(s)
risedronate sodium 35 mg tab dr	1	QL 5 / 30 day(s)
risedronate sodium 5 mg tab	1	QL 30 / 30 day(s)
CALCIMIMETIC AGENTS		
cinacalcet hcl 30 mg tab	1	QL 60 / 30 day(s) S Specialty Drug
cinacalcet hcl 60 mg tab	1	QL 60 / 30 day(s) S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cinacalcet hcl 90 mg tab	1	QL 60 / 30 day(s) S Specialty Drug
CALCITONINS		
calcitonin (salmon) 200 unit/act solution	1	QL 4 / 30 day(s)
CARNITINE REPLENISHER - AGENTS		
levocarnitine 1 gm/10ml solution	1	
levocarnitine 330 mg tab	1	
levocarnitine sf 1 gm/10ml solution	1	
CORTICOTROPIN		
ACTHAR 80 UNIT/ML GEL	3	PA S Specialty Drug
DOPAMINE RECEPTOR AGONISTS		
cabergoline 0.5 mg tab	1	
FABRY DISEASE - AGENTS		
GALAFOLD 123 MG CAP	1	QL 14 / 28 day(s) PA S Specialty Drug
GNRH/LHRH ANTAGONISTS		
fyremadel 250 mcg/0.5ml soln prsyr	1	QL 2.5 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
ganirelix acetate 250 mcg/0.5ml soln prsyr	1	QL 2.5 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
GROWTH HORMONES		
GENOTROPIN 12 MG CARTRIDGE	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENOTROPIN 5 MG CARTRIDGE	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 0.2 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 0.4 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 0.6 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 0.8 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 1 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 1.2 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 1.4 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 1.6 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 1.8 MG PRSYR	3	PA S Specialty Drug
GENOTROPIN MINIQUICK 2 MG PRSYR	3	PA S Specialty Drug
NORDITROPIN FLEXPRO 10 MG/1.5ML SOLN PEN	3	PA S Specialty Drug
NORDITROPIN FLEXPRO 15 MG/1.5ML SOLN PEN	3	PA S Specialty Drug
NORDITROPIN FLEXPRO 30 MG/3ML SOLN PEN	3	PA S Specialty Drug
NORDITROPIN FLEXPRO 5 MG/1.5ML SOLN PEN	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HOMOCYSTINURIA TREATMENT - AGENTS		
betaine powder	1	S Specialty Drug
HYPERAMMONEMIA TREATMENT - AGENTS		
carglumic acid 200 mg tab sol	1	PA S Specialty Drug
HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS		
calcitriol 0.25 mcg cap	1	
calcitriol 0.5 mcg cap	1	
calcitriol 1 mcg/ml solution	1	
doxercalciferol 0.5 mcg cap	2	
doxercalciferol 1 mcg cap	2	
doxercalciferol 2.5 mcg cap	2	
paricalcitol 1 mcg cap	1	
paricalcitol 2 mcg cap	1	
paricalcitol 4 mcg cap	1	
HYPOPHOSPHATASIA (HPP) AGENTS		
STRENSIQ 18 MG/0.45ML SOLUTION	1	PA S Specialty Drug
STRENSIQ 28 MG/0.7ML SOLUTION	1	PA S Specialty Drug
STRENSIQ 40 MG/ML SOLUTION	1	PA S Specialty Drug
STRENSIQ 80 MG/0.8ML SOLUTION	1	PA S Specialty Drug
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON DEPOT-PED (1-MONTH) 11.25 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT-PED (1-MONTH) 15 MG KIT	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT	2	PA S Specialty Drug
LUPRON DEPOT-PED (3-MONTH) 11.25 MG (PED) KIT	2	PA S Specialty Drug
LUPRON DEPOT-PED (3-MONTH) 30 MG KIT	2	PA S Specialty Drug
NATRIURETIC PEPTIDES		
VOXZOGO 0.4 MG RECON SOLN	3	QL 30 / 30 day(s) PA S Specialty Drug
VOXZOGO 0.56 MG RECON SOLN	3	QL 30 / 30 day(s) PA S Specialty Drug
VOXZOGO 1.2 MG RECON SOLN	3	QL 30 / 30 day(s) PA S Specialty Drug
OVULATION STIMULANTS-GONADOTROPINS		
CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN	2	QL 2 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
FOLLISTIM AQ 300 UNT/0.36ML SOLUTION	2	QL 5.4 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
FOLLISTIM AQ 600 UNT/0.72ML SOLUTION	2	QL 5.76 / 30 day(s) PA F Covered under fertility rider S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FOLLISTIM AQ 900 UNT/1.08ML SOLUTION	2	QL 5.4 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
MENOPUR 75 UNIT RECON SOLN	3	QL 60 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
NOVAREL 10000 UNIT RECON SOLN	2	QL 2 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
NOVAREL 5000 UNIT RECON SOLN	2	QL 4 / 30 day(s) PA S Specialty Drug
PREGNYL 10000 UNIT RECON SOLN	2	QL 2 / 30 day(s) PA F Covered under fertility rider S Specialty Drug
OVULATION STIMULANTS-SYNTHETIC		
CLOMID 50 MG TAB	1	PA F Covered under fertility rider
PARATHYROID HORMONE AND DERIVATIVES		
teriparatide (recombinant) 600 mcg/2.4ml soln pen	1	QL 2.4 / 28 days PA S Specialty Drug
teriparatide 600 mcg/2.4ml soln pen	1	QL 2.4 / 28 days PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYMLOS 3120 MCG/1.56ML SOLN PEN	1	QL 2 / 30 day(s) PA AL1 At least 18 yrs old S Specialty Drug
PHENYLKETONURIA TREATMENT - AGENTS		
javygtor 100 mg packet	2	PA S Specialty Drug
javygtor 500 mg packet	2	PA S Specialty Drug
PALYNZIQ 10 MG/0.5ML SOLN PRSYR	3	QL 60 / 30 day(s) PA S Specialty Drug
PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR	3	QL 240 / 30 day(s) PA S Specialty Drug
PALYNZIQ 20 MG/ML SOLN PRSYR	3	QL 60 / 30 day(s) PA S Specialty Drug
sapropterin dihydrochloride 100 mg packet	2	PA S Specialty Drug
sapropterin dihydrochloride 100 mg tab	2	PA S Specialty Drug
sapropterin dihydrochloride 500 mg packet	2	PA S Specialty Drug
RANK LIGAND (RANKL) INHIBITORS		
PROLIA 60 MG/ML SOLN PRSYR	1	PA S Specialty Drug QLC 1 / 180 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
raloxifene hcl 60 mg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS		
JYNARQUE 15 MG TAB	3	PA S Specialty Drug QLC 30 / 365 day(s)
JYNARQUE 15 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
JYNARQUE 30 & 15 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
JYNARQUE 30 MG TAB	3	PA S Specialty Drug QLC 60 / 365 day(s)
JYNARQUE 45 & 15 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
JYNARQUE 60 & 30 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
JYNARQUE 90 & 30 MG TAB THPK	3	QL 56 / 28 day(s) PA S Specialty Drug
tolvaptan 30 mg tab	2	S Specialty Drug QLC 60 / 365 day(s)
SOMATOSTATIC AGENTS		
LANREOTIDE ACETATE 120 MG/0.5ML SOLUTION	3	QL 0.5 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OCTREOTIDE ACETATE 100 MCG/ML SOLN PRSYR	1	QL 90 / 30 day(s) PA S Specialty Drug
octreotide acetate 100 mcg/ml solution	1	QL 90 / 30 day(s) PA S Specialty Drug
octreotide acetate 1000 mcg/ml solution	1	QL 6 / 30 day(s) PA S Specialty Drug
octreotide acetate 200 mcg/ml solution	1	QL 18 / 30 day(s) PA S Specialty Drug
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR	1	QL 90 / 30 day(s) PA S Specialty Drug
octreotide acetate 50 mcg/ml solution	1	QL 90 / 30 day(s) PA S Specialty Drug
OCTREOTIDE ACETATE 500 MCG/ML SOLN PRSYR	1	QL 90 / 30 day(s) PA S Specialty Drug
octreotide acetate 500 mcg/ml solution	1	QL 90 / 30 day(s) PA S Specialty Drug
SANDOSTATIN LAR DEPOT 10 MG KIT	3	QL 1 / 28 day(s) PA S Specialty Drug
SANDOSTATIN LAR DEPOT 20 MG KIT	3	QL 1 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SANDOSTATIN LAR DEPOT 30 MG KIT	3	QL 1 / 28 day(s) PA S Specialty Drug
SOMATULINE DEPOT 120 MG/0.5ML SOLUTION	3	QL 0.5 / 28 day(s) PA S Specialty Drug
SOMATULINE DEPOT 60 MG/0.2ML SOLUTION	3	QL 0.2 / 28 day(s) PA S Specialty Drug
SOMATULINE DEPOT 90 MG/0.3ML SOLUTION	3	QL 0.3 / 28 day(s) PA S Specialty Drug
UREA CYCLE DISORDER - AGENTS		
sodium phenylbutyrate 500 mg tab	1	PA S Specialty Drug
VASOPRESSIN		
desmopressin ace spray refrig 0.01 % solution	1	
desmopressin acetate 0.1 mg tab	1	
desmopressin acetate 0.2 mg tab	1	
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	2	
desmopressin acetate spray 0.01 % solution	1	
STIMATE 1.5 MG/ML SOLUTION	2	
ESTROGENS		
ESTROGEN & PROGESTIN		
amabelz 0.5-0.1 mg tab	1	QL 30 / 30 day(s)
amabelz 1-0.5 mg tab	1	QL 30 / 30 day(s)
estradiol-norethindrone acet 0.5-0.1 mg tab	1	QL 30 / 30 day(s)
estradiol-norethindrone acet 1-0.5 mg tab	1	QL 30 / 30 day(s)
fyavolv 0.5-2.5 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fyavolv 1-5 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
jinteli 1-5 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
lopreeza 1-0.5 mg tab	1	QL 30 / 30 day(s)
mimvey 1-0.5 mg tab	1	QL 30 / 30 day(s)
norethindrone-eth estradiol 0.5-2.5 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
norethindrone-eth estradiol 1-5 mg-mcg tab	1	QL 30 / 30 day(s) ACA Affordable Care Act
PREMPHASE 0.625-5 MG TAB	2	QL 30 / 30 day(s)
PREMPRO 0.3-1.5 MG TAB	2	QL 30 / 30 day(s)
PREMPRO 0.45-1.5 MG TAB	2	QL 30 / 30 day(s)
PREMPRO 0.625-2.5 MG TAB	2	QL 30 / 30 day(s)
PREMPRO 0.625-5 MG TAB	2	QL 30 / 30 day(s)
ESTROGEN-PROGESTIN-GNRH ANTAGONIST		
ORIAHNN 300-1-0.5 & 300 MG CAP THPK	2	QL 56 / 28 day(s) PA
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB		
DUAVEE 0.45-20 MG TAB	2	
DIVIGEL 0.25 MG/0.25GM GEL	2	QL 30 / 30 day(s)
DIVIGEL 0.5 MG/0.5GM GEL	2	QL 30 / 30 day(s)
DIVIGEL 0.75 MG/0.75GM GEL	2	QL 30 / 30 day(s)
DIVIGEL 1 MG/GM GEL	2	QL 30 / 30 day(s)
DIVIGEL 1.25 MG/1.25GM GEL	2	QL 37.5 / 30 day(s)
dotti 0.025 mg/24hr patch tw	1	QL 8 / 28 day(s)
dotti 0.0375 mg/24hr patch tw	1	QL 8 / 28 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dotti 0.05 mg/24hr patch tw	1	QL 8 / 28 day(s)
dotti 0.075 mg/24hr patch tw	1	QL 8 / 28 day(s)
dotti 0.1 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.025 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.025 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.0375 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.0375 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.05 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.05 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.06 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.075 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.075 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.1 mg/24hr patch tw	1	QL 8 / 28 day(s)
estradiol 0.1 mg/24hr patch wk	1	QL 4 / 28 day(s)
estradiol 0.5 mg tab	1	QL 30 / 30 day(s)
estradiol 1 mg tab	1	QL 30 / 30 day(s)
estradiol 2 mg tab	1	QL 30 / 30 day(s)
ESTROGEL 0.75 MG/1.25 GM (0.06%) GEL	2	QL 50 / 30 day(s)
lyllana 0.025 mg/24hr patch tw	1	QL 8 / 28 day(s)
lyllana 0.0375 mg/24hr patch tw	1	QL 8 / 28 day(s)
lyllana 0.05 mg/24hr patch tw	1	QL 8 / 28 day(s)
lyllana 0.075 mg/24hr patch tw	1	QL 8 / 28 day(s)
lyllana 0.1 mg/24hr patch tw	1	QL 8 / 28 day(s)
MENEST 0.3 MG TAB	2	QL 30 / 30 day(s)
MENEST 0.625 MG TAB	2	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREMARIN 0.3 MG TAB	2	QL 30 / 30 day(s)
PREMARIN 0.45 MG TAB	2	QL 30 / 30 day(s)
PREMARIN 0.625 MG TAB	2	QL 30 / 30 day(s)
PREMARIN 0.9 MG TAB	2	QL 30 / 30 day(s)
PREMARIN 1.25 MG TAB	2	QL 30 / 30 day(s)
FLUOROQUINOLONES		
CIPRO 250 MG/5ML (5%) RECON SUSP	1	QLC 210/30 day(s)
CIPRO 500 MG/5ML (10%) RECON SUSP	1	QLC 300/30 day(s)
ciprofloxacin hcl 250 mg tab	1	QL 60 / 30 day(s)
ciprofloxacin hcl 500 mg tab	1	QL 60 / 30 day(s)
ciprofloxacin hcl 750 mg tab	1	QL 60 / 30 day(s)
levofloxacin 25 mg/ml solution	1	
levofloxacin 250 mg tab	1	QL 30 / Rx
levofloxacin 500 mg tab	1	QL 30 / Rx
levofloxacin 750 mg tab	1	QL 30 / Rx
moxifloxacin hcl 400 mg tab	2	QL 21 / Rx
OFLOXACIN 300 MG TAB	2	QL 56 / Rx
ofloxacin 400 mg tab	2	QL 56 / Rx
GASTROINTESTINAL AGENTS - MISC.		
CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
TRULANCE 3 MG TAB	2	PA
GALLSTONE SOLUBILIZING AGENTS		
ursodiol 250 mg tab	1	
ursodiol 300 mg cap	1	
ursodiol 500 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GASTROINTESTINAL ANTIALLERGY AGENTS		
cromolyn sodium 100 mg/5ml conc	1	
GASTROINTESTINAL STIMULANTS		
metoclopramide hcl 10 mg tab	1	
metoclopramide hcl 10 mg/10ml solution	1	
metoclopramide hcl 5 mg tab	1	
metoclopramide hcl 5 mg/5ml solution	1	
IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
LINZESS 145 MCG CAP	2	QL 30 / 30 day(s) PA AL1 At least 6 yrs old
LINZESS 290 MCG CAP	2	QL 30 / 30 day(s) PA AL1 At least 6 yrs old
LINZESS 72 MCG CAP	2	QL 30 / 30 day(s) PA AL1 At least 6 yrs old
INFLAMMATORY BOWEL AGENTS		
balsalazide disodium 750 mg cap	1	
mesalamine 1.2 gm tab dr	1	
mesalamine 1000 mg suppos	1	
mesalamine 4 gm enema	1	
mesalamine 400 mg cap dr	1	
MESALAMINE 800 MG TAB DR	1	
mesalamine 800 mg tab dr	1	
mesalamine er 0.375 gm cap er 24h	1	
sulfasalazine 500 mg tab	1	
sulfasalazine 500 mg tab dr	1	
INTESTINAL ACIDIFIERS		
enulose 10 gm/15ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
generlac 10 gm/15ml solution	1	
lactulose encephalopathy 10 gm/15ml solution	1	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK 12.5 MG TAB	2	QL 30 / 30 day(s) PA
MOVANTIK 25 MG TAB	2	QL 30 / 30 day(s) PA
PHOSPHATE BINDER AGENTS		
calcium acetate (phos binder) 667 mg cap	1	
calcium acetate (phos binder) 667 mg tab	1	OTC Over the Counter
calcium acetate 667 mg tab	1	
lanthanum carbonate 1000 mg chew tab	2	
lanthanum carbonate 500 mg chew tab	2	
lanthanum carbonate 750 mg chew tab	2	
sevelamer carbonate 800 mg tab	1	
VELPHORO 500 MG CHEW TAB	2	
TUMOR NECROSIS FACTOR ALPHA BLOCKERS		
CIMZIA (2 SYRINGE) 200 MG/ML PREF SY KT	3	QL 2 / 28 day(s) PA S Specialty Drug
CIMZIA STARTER KIT 6 X 200 MG/ML PREF SY KT	3	QL 3 / 30 day(s) PA S Specialty Drug
GENITOURINARY AGENTS - MISCELLANEOUS		
5-ALPHA REDUCTASE INHIBITORS		
dutasteride 0.5 mg cap	1	
finasteride 5 mg tab	1	
ALPHA 1-ADRENOCEPTOR ANTAGONISTS		
alfuzosin hcl er 10 mg tab er 24h	1	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tamsulosin hcl 0.4 mg cap	1	
CITRATES		
potassium citrate er 10 meq (1080 mg) tab er	1	
potassium citrate er 15 meq (1620 mg) tab er	1	
potassium citrate er 5 meq (540 mg) tab er	1	
sod citrate-citric acid 1.5-1 gm/15ml solution	1	
sod citrate-citric acid 3-2 gm/30ml solution	1	
sod citrate-citric acid 500-334 mg/5ml solution	1	
CYSTINOSIS AGENTS		
CYSTAGON 150 MG CAP	2	QL 390 / 30 day(s) S Specialty Drug
CYSTAGON 50 MG CAP	2	QL 1200 / 30 day(s) S Specialty Drug
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100 MG CAP	2	QL 90 / 30 day(s) PA
URINARY STONE AGENTS		
tiopronin 100 mg tab	2	S Specialty Drug
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
colchicine-probenecid 0.5-500 mg tab	1	QL 60 / 30 day(s)
allopurinol 100 mg tab	1	
allopurinol 300 mg tab	1	
colchicine 0.6 mg tab	1	
URICOSURICS		
probenecid 500 mg tab	1	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
ADVATE 1000 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 1500 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 2000 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 250 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 3000 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 4000 UNIT RECON SOLN	3	PA S Specialty Drug
ADVATE 500 UNIT RECON SOLN	3	PA S Specialty Drug
ADYNOVATE 1000 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 1500 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 2000 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 250 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 3000 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 500 UNIT RECON SOLN	1	PA S Specialty Drug
ADYNOVATE 750 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFSTYLA 1000 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 1500 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 2000 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 250 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 2500 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 3000 UNIT KIT	1	PA S Specialty Drug
AFSTYLA 500 UNIT KIT	1	PA S Specialty Drug
ALPHANINE SD 1000 UNIT RECON SOLN	3	PA S Specialty Drug
ALPHANINE SD 1500 UNIT RECON SOLN	3	PA S Specialty Drug
ALPHANINE SD 500 UNIT RECON SOLN	3	PA S Specialty Drug
ALPROLIX 1000 UNIT RECON SOLN	1	PA S Specialty Drug
ALPROLIX 2000 UNIT RECON SOLN	1	PA S Specialty Drug
ALPROLIX 250 UNIT RECON SOLN	1	PA S Specialty Drug
ALPROLIX 3000 UNIT RECON SOLN	1	PA S Specialty Drug
ALPROLIX 4000 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPROLIX 500 UNIT RECON SOLN	1	PA S Specialty Drug
BENEFIX 1000 UNIT KIT	3	PA S Specialty Drug
BENEFIX 2000 UNIT KIT	3	PA S Specialty Drug
BENEFIX 250 UNIT KIT	3	PA S Specialty Drug
BENEFIX 3000 UNIT KIT	3	PA S Specialty Drug
BENEFIX 500 UNIT KIT	3	PA S Specialty Drug
COAGADEX 250 UNIT RECON SOLN	1	PA S Specialty Drug
COAGADEX 500 UNIT RECON SOLN	1	PA S Specialty Drug
CORIFACT 1000-1600 UNIT KIT	3	S Specialty Drug
ELOCTATE 1000 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 1500 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 2000 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 250 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 3000 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 4000 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELOCTATE 500 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 5000 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 6000 UNIT RECON SOLN	1	PA S Specialty Drug
ELOCTATE 750 UNIT RECON SOLN	1	PA S Specialty Drug
ESPEROCT 1000 UNIT RECON SOLN	1	PA S Specialty Drug
ESPEROCT 1500 UNIT RECON SOLN	1	PA S Specialty Drug
ESPEROCT 2000 UNIT RECON SOLN	1	PA S Specialty Drug
ESPEROCT 3000 UNIT RECON SOLN	1	PA S Specialty Drug
ESPEROCT 500 UNIT RECON SOLN	1	PA S Specialty Drug
FEIBA 1000 UNIT RECON SOLN	3	S Specialty Drug
FEIBA 2500 UNIT RECON SOLN	3	S Specialty Drug
FEIBA 500 UNIT RECON SOLN	3	S Specialty Drug
FIBRYGA RECON SOLN	1	PA S Specialty Drug
HEMOFIL M 1000 UNIT RECON SOLN	1	PA S Specialty Drug
HEMOFIL M 1700 UNIT RECON SOLN	1	PA S Specialty Drug
HEMOFIL M 250 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMOFIL M 500 UNIT RECON SOLN	1	PA S Specialty Drug
HUMATE-P 1000-2400 UNIT RECON SOLN	3	S Specialty Drug
HUMATE-P 250-600 UNIT RECON SOLN	3	S Specialty Drug
HUMATE-P 500-1200 UNIT RECON SOLN	3	S Specialty Drug
IDELVION 1000 UNIT RECON SOLN	3	PA S Specialty Drug
IDELVION 2000 UNIT RECON SOLN	3	PA S Specialty Drug
IDELVION 250 UNIT RECON SOLN	3	PA S Specialty Drug
IDELVION 3500 UNIT RECON SOLN	3	PA S Specialty Drug
IDELVION 500 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 1000 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 1500 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 2000 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 250 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 3000 UNIT RECON SOLN	3	PA S Specialty Drug
IXINITY 500 UNIT RECON SOLN	3	PA S Specialty Drug
JIVI 1000 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JIVI 2000 UNIT RECON SOLN	1	PA S Specialty Drug
JIVI 3000 UNIT RECON SOLN	1	PA S Specialty Drug
JIVI 500 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE 1000 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE 250 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE 500 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE-DVI 1000 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE-DVI 250 UNIT RECON SOLN	1	PA S Specialty Drug
KOATE-DVI 500 UNIT RECON SOLN	1	PA S Specialty Drug
KOGENATE FS 1000 UNIT KIT	1	PA S Specialty Drug
KOGENATE FS 2000 UNIT KIT	1	PA S Specialty Drug
KOGENATE FS 250 UNIT KIT	1	PA S Specialty Drug
KOGENATE FS 3000 UNIT KIT	1	PA S Specialty Drug
KOGENATE FS 500 UNIT KIT	1	PA S Specialty Drug
KOVALTRY 1000 UNIT RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOVALTRY 2000 UNIT RECON SOLN	1	PA S Specialty Drug
KOVALTRY 250 UNIT RECON SOLN	1	PA S Specialty Drug
KOVALTRY 3000 UNIT RECON SOLN	1	PA S Specialty Drug
KOVALTRY 500 UNIT RECON SOLN	1	PA S Specialty Drug
MONONINE 1000 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 1000 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 1500 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 2000 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 250 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 3000 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOEIGHT 500 UNIT RECON SOLN	3	PA S Specialty Drug
NOVOSEVEN RT 1 MG RECON SOLN	3	PA S Specialty Drug
NOVOSEVEN RT 2 MG RECON SOLN	3	PA S Specialty Drug
NOVOSEVEN RT 5 MG RECON SOLN	3	PA S Specialty Drug
NOVOSEVEN RT 8 MG RECON SOLN	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUWIQ 1000 UNIT KIT	3	PA S Specialty Drug
NUWIQ 1000 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 1500 UNIT KIT	3	PA S Specialty Drug
NUWIQ 1500 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 2000 UNIT KIT	3	PA S Specialty Drug
NUWIQ 2000 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 250 UNIT KIT	3	PA S Specialty Drug
NUWIQ 250 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 2500 UNIT KIT	3	PA S Specialty Drug
NUWIQ 2500 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 3000 UNIT KIT	3	PA S Specialty Drug
NUWIQ 3000 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 4000 UNIT KIT	3	PA S Specialty Drug
NUWIQ 4000 UNIT RECON SOLN	3	PA S Specialty Drug
NUWIQ 500 UNIT KIT	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUWIQ 500 UNIT RECON SOLN	3	PA S Specialty Drug
OBIZUR 500 UNIT RECON SOLN	3	S Specialty Drug
PROFILNINE 1000 UNIT RECON SOLN	3	PA S Specialty Drug
PROFILNINE 1500 UNIT RECON SOLN	3	PA S Specialty Drug
PROFILNINE 500 UNIT RECON SOLN	3	PA S Specialty Drug
REBINYN 1000 UNIT RECON SOLN	3	PA S Specialty Drug
REBINYN 2000 UNIT RECON SOLN	3	PA S Specialty Drug
REBINYN 3000 UNIT RECON SOLN	3	PA S Specialty Drug
REBINYN 500 UNIT RECON SOLN	3	PA S Specialty Drug
RECOMBINATE 1241-1800 UNIT RECON SOLN	1	PA S Specialty Drug
RECOMBINATE 1801-2400 UNIT RECON SOLN	1	PA S Specialty Drug
RECOMBINATE 220-400 UNIT RECON SOLN	1	PA S Specialty Drug
RECOMBINATE 401-800 UNIT RECON SOLN	1	PA S Specialty Drug
RECOMBINATE 801-1240 UNIT RECON SOLN	1	PA S Specialty Drug
RIASTAP RECON SOLN	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIXUBIS 1000 UNIT RECON SOLN	3	PA S Specialty Drug
RIXUBIS 2000 UNIT RECON SOLN	3	PA S Specialty Drug
RIXUBIS 250 UNIT RECON SOLN	3	PA S Specialty Drug
RIXUBIS 3000 UNIT RECON SOLN	3	PA S Specialty Drug
RIXUBIS 500 UNIT RECON SOLN	3	PA S Specialty Drug
SEVENFACT 1 MG RECON SOLN	3	PA S Specialty Drug
SEVENFACT 5 MG RECON SOLN	3	PA S Specialty Drug
TRETTEN 2500 UNIT RECON SOLN	3	S Specialty Drug
WILATE 1000-1000 UNIT KIT	3	S Specialty Drug
WILATE 500-500 UNIT KIT	3	S Specialty Drug
XYNTHA 1000 UNIT KIT	1	PA S Specialty Drug
XYNTHA 2000 UNIT KIT	1	PA S Specialty Drug
XYNTHA 250 UNIT KIT	1	PA S Specialty Drug
XYNTHA 500 UNIT KIT	1	PA S Specialty Drug
XYNTHA SOLOFUSE 1000 UNIT KIT	1	PA S Specialty Drug
XYNTHA SOLOFUSE 2000 UNIT KIT	1	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYNTHA SOLOFUSE 250 UNIT KIT	1	PA S Specialty Drug
XYNTHA SOLOFUSE 3000 UNIT KIT	1	PA S Specialty Drug
XYNTHA SOLOFUSE 500 UNIT KIT	1	PA S Specialty Drug
ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES		
HEMLIBRA 105 MG/0.7ML SOLUTION	1	QL 2.8 / 28 day(s) PA S Specialty Drug
HEMLIBRA 150 MG/ML SOLUTION	1	QL 4 / 28 day(s) PA S Specialty Drug
HEMLIBRA 30 MG/ML SOLUTION	1	QL 4 / 28 day(s) PA S Specialty Drug
HEMLIBRA 300 MG/2ML SOLUTION	1	QL 4 / 28 days PA S Specialty Drug
HEMLIBRA 60 MG/0.4ML SOLUTION	1	QL 1.6 / 28 day(s) PA S Specialty Drug
BRADYKININ B2 RECEPTOR ANTAGONISTS		
icatibant acetate 30 mg/3ml soln prsyr	1	QL 18 / 30 day(s) PA S Specialty Drug
sajazir 30 mg/3ml soln prsyr	1	QL 18 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
C1 ESTERASE INHIBITORS		
HAEGARDA 2000 UNIT RECON SOLN	1	QL 24 / 30 day(s) PA S Specialty Drug
HAEGARDA 3000 UNIT RECON SOLN	1	QL 16 / 30 day(s) PA S Specialty Drug
DIRECT-ACTING P2Y12 INHIBITORS		
BRILINTA 60 MG TAB	2	
BRILINTA 90 MG TAB	2	
HEMATORHEOLOGIC AGENTS		
pentoxifylline er 400 mg tab er	1	
PHOSPHODIESTERASE III INHIBITORS		
cilostazol 100 mg tab	1	
cilostazol 50 mg tab	1	
PLATELET AGGREGATION INHIBITOR COMBINATIONS		
aspirin-dipyridamole er 25-200 mg cap er 12h	1	
PLATELET AGGREGATION INHIBITORS		
dipyridamole 25 mg tab	1	
dipyridamole 50 mg tab	1	
dipyridamole 75 mg tab	1	
QUINAZOLINE AGENTS		
anagrelide hcl 0.5 mg cap	1	QL 120 / 30 day(s)
anagrelide hcl 1 mg cap	1	QL 120 / 30 day(s)
THIENOPYRIDINE DERIVATIVES		
clopidogrel bisulfate 300 mg tab	1	
clopidogrel bisulfate 75 mg tab	1	
prasugrel hcl 10 mg tab	1	
prasugrel hcl 5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84 MG CAP	1	QL 60 / 30 day(s) PA S Specialty Drug
miglustat 100 mg cap	1	QL 90 / 30 day(s) PA S Specialty Drug
yargesa 100 mg cap	1	QL 90 / 30 day(s) PA S Specialty Drug
AMINO ACIDS		
ENDARI 5 GM PACKET	1	QL 180 / 30 day(s) PA S Specialty Drug
COBALAMINS		
b-12 100 mcg tab	1	OTC Over the Counter
b-12 1000 mcg sl tab	1	OTC Over the Counter
b-12 1000 mcg tab	1	OTC Over the Counter
b-12-sl 1000 mcg sl tab	1	OTC Over the Counter
cvs vitamin b-12 1000 mcg tab	1	OTC Over the Counter
cvs vitamin b12 1000 mcg tab	1	OTC Over the Counter
cyanocobalamin 1000 mcg/ml solution	1	
dodex 1000 mcg/ml solution	1	
eql b-12 1000 mcg tab	1	OTC Over the Counter
kp vitamin b-12 1000 mcg tab	1	OTC Over the Counter
ra vitamin b-12 100 mcg tab	1	OTC Over the Counter
sm vitamin b-12 100 mcg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
true vitamin b12 1000 mcg tab	1	OTC Over the Counter
vitamin b-12 100 mcg tab	1	OTC Over the Counter
vitamin b-12 1000 mcg sl tab	1	OTC Over the Counter
vitamin b-12 1000 mcg tab	1	OTC Over the Counter
vitamin b12 100 mcg tab	1	OTC Over the Counter
CYTOTOXIC AGENTS		
DROXIA 200 MG CAP	2	S Specialty Drug
DROXIA 300 MG CAP	2	S Specialty Drug
DROXIA 400 MG CAP	2	S Specialty Drug
ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)		
RETACRIT 10000 UNIT/ML SOLUTION	1	PA S Specialty Drug
RETACRIT 2000 UNIT/ML SOLUTION	1	PA S Specialty Drug
RETACRIT 20000 UNIT/ML SOLUTION	1	PA S Specialty Drug
RETACRIT 3000 UNIT/ML SOLUTION	1	PA S Specialty Drug
RETACRIT 4000 UNIT/ML SOLUTION	1	PA S Specialty Drug
RETACRIT 40000 UNIT/ML SOLUTION	1	PA S Specialty Drug
FOLIC ACID/FOLATE COMBINATIONS		
fabb 2.2-25-1 mg tab	1	
folbee 2.5-25-1 mg tab	1	
FOLGARD RX 2.2-25-1 MG TAB	1	
folplex 2.2 2.2-25-0.5 mg tab	1	
tl gard rx 2.2-25-1 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
virt-gard 2.2-25-1 mg tab	1	
FOLIC ACID/FOLATES		
cvs folic acid 800 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
fa-8 0.8 mg cap	1	ACA Affordable Care Act OTC Over the Counter
folate 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
folic acid 0.8 mg cap	1	ACA Affordable Care Act OTC Over the Counter
folic acid 1 mg tab	1	
folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
folic acid 800 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
gnp folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
hm folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
kp folic acid 800 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
px folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
qc folic acid 800 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
ra folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
ra folic acid 800 mcg tab	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
true folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
yl folic acid 400 mcg tab	1	ACA Affordable Care Act OTC Over the Counter
GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)		
FULPHILA 6 MG/0.6ML SOLN PRSYR	1	PA S Specialty Drug
NIVESTYM 300 MCG/0.5ML SOLN PRSYR	1	PA S Specialty Drug
NIVESTYM 300 MCG/ML SOLUTION	1	PA S Specialty Drug
NIVESTYM 480 MCG/0.8ML SOLN PRSYR	1	PA S Specialty Drug
NIVESTYM 480 MCG/1.6ML SOLUTION	1	PA S Specialty Drug
ZARXIO 300 MCG/0.5ML SOLN PRSYR	1	PA S Specialty Drug
ZARXIO 480 MCG/0.8ML SOLN PRSYR	1	PA S Specialty Drug
IRON		
bprotected pedia iron 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
cvs iron 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
eql iron supplement therapy 325 mg tab	1	ACA Affordable Care Act OTC Over the Counter
fe-vite iron 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ferosul 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
ferrex 150 150 mg cap	1	OTC Over the Counter
ferric x-150 150 mg cap	1	OTC Over the Counter
ferrous sulfate 220 (44 fe) mg/5ml solution	1	ACA Affordable Care Act OTC Over the Counter
ferrous sulfate 300 (60 fe) mg/5ml solution	1	ACA Affordable Care Act OTC Over the Counter
ferrous sulfate 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
ferrous sulfate 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
goodsense iron 325 mg tab	1	ACA Affordable Care Act OTC Over the Counter
iferex 150 150 mg cap	1	OTC Over the Counter
iron (ferrous sulfate) 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
iron (ferrous sulfate) 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
iron 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
iron high-potency 325 mg tab	1	ACA Affordable Care Act OTC Over the Counter
iron infant & toddler 15 mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
iron infant/toddler 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
iron supplement 15 mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
iron supplement 220 (44 fe) mg/5ml solution	1	ACA Affordable Care Act OTC Over the Counter
iron supplement childrens 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
IRON UP 15 MG/0.5ML LIQUID	1	ACA Affordable Care Act OTC Over the Counter
kp ferrous sulfate 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
meijer ferrous sulfate 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
myferon 150 150 mg cap	1	OTC Over the Counter
nat-rul iron 325 mg tab	1	ACA Affordable Care Act OTC Over the Counter
nu-iron 150 mg cap	1	OTC Over the Counter
pc pediatric iron drops 15 mg/ml solution	1	ACA Affordable Care Act OTC Over the Counter
poly-iron 150 150 mg cap	1	OTC Over the Counter
polysaccharide iron complex 150 mg cap	1	OTC Over the Counter
polysaccharide-iron complex 150 mg cap	1	OTC Over the Counter
qc ferrous sulfate 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
ra iron 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
sm iron 325 (65 fe) mg tab	1	ACA Affordable Care Act OTC Over the Counter
sv iron 325 mg tab	1	ACA Affordable Care Act OTC Over the Counter
wee care 15 mg/1.25ml suspension	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IRON COMBINATIONS		
FOLVITE-FE 90-120-0.012-1 MG TAB	1	
IS 24/6 MISC	1	
THROMBOPOIETIN (TPO) RECEPTOR AGONISTS		
DOPTELET 20 MG TAB	1	QL 60 / 30 day(s) PA S Specialty Drug
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
aminocaproic acid 0.25 gm/ml solution	2	
aminocaproic acid 1000 mg tab	1	
aminocaproic acid 500 mg tab	1	
tranexamic acid 650 mg tab	1	QL 180 / 30 day(s)
HEMOSTATICS - TOPICAL		
RECOTHROM 20000 UNIT RECON SOLN	3	S Specialty Drug
RECOTHROM 5000 UNIT RECON SOLN	3	S Specialty Drug
RECOTHROM SPRAY KIT 20000 UNIT RECON SOLN	3	S Specialty Drug
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
ANTIHISTAMINE HYPNOTICS		
sominex nighttime sleep-aid 25 mg tab	1	OTC Over the Counter
BARBITURATE HYPNOTICS		
phenobarbital 100 mg tab	1	
phenobarbital 15 mg tab	1	
phenobarbital 16.2 mg tab	1	
phenobarbital 20 mg/5ml elixir	1	
phenobarbital 20 mg/5ml solution	1	
phenobarbital 30 mg tab	1	
phenobarbital 32.4 mg tab	1	
phenobarbital 60 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phenobarbital 64.8 mg tab	1	
phenobarbital 97.2 mg tab	1	
BENZODIAZEPINE HYPNOTICS		
estazolam 1 mg tab	1	QL 30 / 30 day(s)
estazolam 2 mg tab	1	QL 30 / 30 day(s)
FLURAZEPAM HCL 15 MG CAP	1	QL 30 / 30 day(s)
FLURAZEPAM HCL 30 MG CAP	1	QL 30 / 30 day(s)
temazepam 15 mg cap	1	QL 30 / 30 day(s)
temazepam 30 mg cap	1	QL 30 / 30 day(s)
NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS		
eszopiclone 1 mg tab	1	QL 30 / 30 day(s)
eszopiclone 2 mg tab	1	QL 30 / 30 day(s)
eszopiclone 3 mg tab	1	QL 30 / 30 day(s) AL1 Up to 65 yrs old
zaleplon 10 mg cap	1	QL 30 / 30 day(s)
zaleplon 5 mg cap	1	QL 30 / 30 day(s)
zolpidem tartrate 10 mg tab	1	QL 30 / 30 day(s)
zolpidem tartrate 5 mg tab	1	QL 30 / 30 day(s)
zolpidem tartrate er 12.5 mg tab er	1	QL 30 / 30 day(s)
zolpidem tartrate er 6.25 mg tab er	1	QL 30 / 30 day(s)
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA 10 MG TAB	2	QL 30 / 30 day(s) ST
BELSOMRA 15 MG TAB	2	QL 30 / 30 day(s) ST
BELSOMRA 20 MG TAB	2	QL 30 / 30 day(s) ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BELSOMRA 5 MG TAB	2	QL 30 / 30 day(s) ST
LAXATIVES		
BOWEL EVACUANT COMBINATIONS		
gavilyte-g 236 gm recon soln	1	ACA Affordable Care Act
gavilyte-h 5-210 mg-gm kit	1	
gavilyte-n with flavor pack 420 gm recon soln	1	ACA Affordable Care Act
peg 3350-kcl-na bicarb-nacl 420 gm recon soln	1	ACA Affordable Care Act
peg-3350/electrolytes 236 gm recon soln	1	ACA Affordable Care Act
SUPREP BOWEL PREP KIT 17.5-3.13-1.6 GM/177ML SOLUTION	1	QL 354 / Rx
trilyte 420 gm recon soln	1	ACA Affordable Care Act
LAXATIVES - MISCELLANEOUS		
constulose 10 gm/15ml solution	1	
lactulose 10 gm/15ml solution	1	
lactulose 20 gm/30ml solution	1	
MIRALAX 17 GM/SCOOP POWDER	1	OTC Over the Counter
MIRALAX 17 GM/SCOOP POWDER	1	OTC Over the Counter
STIMULANT LAXATIVES		
bisacodyl 10 mg suppos	1	OTC Over the Counter
bisacodyl laxative 10 mg suppos	1	OTC Over the Counter
cvs gentle laxative 10 mg suppos	1	OTC Over the Counter
cvs senna 8.6 mg tab	1	OTC Over the Counter
eq natural laxative 8.6 mg tab	1	OTC Over the Counter
eq natural vegetable laxative 8.6 mg tab	1	OTC Over the Counter
eq vegetable laxative 8.6 mg tab	1	OTC Over the Counter
eql senna laxative 8.6 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
evac-u-gen 8.6 mg tab	1	OTC Over the Counter
ft gentle laxative 10 mg suppos	1	OTC Over the Counter
ft senna laxative 8.6 mg tab	1	OTC Over the Counter
ft senna laxatives 8.6 mg tab	1	OTC Over the Counter
gentle laxative 10 mg suppos	1	OTC Over the Counter
geri-kot 8.6 mg tab	1	OTC Over the Counter
gnp gentle laxative 10 mg suppos	1	OTC Over the Counter
gnp senna lax 8.6 mg tab	1	OTC Over the Counter
gnp senna-lax 8.6 mg tab	1	OTC Over the Counter
goodsense senna laxative 8.6 mg tab	1	OTC Over the Counter
hm gentle laxative 10 mg suppos	1	OTC Over the Counter
hm laxative 10 mg suppos	1	OTC Over the Counter
hm senna 8.6 mg tab	1	OTC Over the Counter
kp senna 8.6 mg tab	1	OTC Over the Counter
laxative 10 mg suppos	1	OTC Over the Counter
medi-natural 8.6 mg tab	1	OTC Over the Counter
natural senna laxative 8.6 mg tab	1	OTC Over the Counter
onelax 10 mg suppos	1	OTC Over the Counter
px vegetable laxative 8.6 mg tab	1	OTC Over the Counter
qc gentle laxative 10 mg suppos	1	OTC Over the Counter
qc natural vegetable laxative 8.6 mg tab	1	OTC Over the Counter
qc senna 8.6 mg tab	1	OTC Over the Counter
qc vegetable laxative 8.6 mg tab	1	OTC Over the Counter
ra fast relief laxative 10 mg suppos	1	OTC Over the Counter
ra senna 8.6 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sb laxative 10 mg suppos	1	OTC Over the Counter
sb senna-lax 8.6 mg tab	1	OTC Over the Counter
senna 8.6 mg cap	1	OTC Over the Counter
senna 8.6 mg tab	1	OTC Over the Counter
senna laxative 8.6 mg tab	1	OTC Over the Counter
senna-lax 8.6 mg tab	1	OTC Over the Counter
senna-tabs 8.6 mg tab	1	OTC Over the Counter
senna-time 8.6 mg tab	1	OTC Over the Counter
senno 8.6 mg tab	1	OTC Over the Counter
sm laxative 10 mg suppos	1	OTC Over the Counter
sm senna laxative 8.6 mg tab	1	OTC Over the Counter
tgt senna 8.6 mg tab	1	OTC Over the Counter
tgt senna laxative 8.6 mg tab	1	OTC Over the Counter
the magic bullet 10 mg suppos	1	OTC Over the Counter
SURFACTANT LAXATIVES		
correctol extra gentle 100 mg cap	1	OTC Over the Counter
cvs stool softener 100 mg cap	1	OTC Over the Counter
cvs stool softener 240 mg cap	1	OTC Over the Counter
cvs stool softener 250 mg cap	1	OTC Over the Counter
docu soft 100 mg cap	1	OTC Over the Counter
docusate calcium 240 mg cap	1	OTC Over the Counter
docusate sodium 100 mg cap	1	OTC Over the Counter
docusate sodium 100 mg tab	1	OTC Over the Counter
docusate sodium 250 mg cap	1	OTC Over the Counter
dok 100 mg cap	1	OTC Over the Counter
dok 100 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dss 100 mg cap	1	OTC Over the Counter
dss 250 mg cap	1	OTC Over the Counter
dulcolax pink stool softener 100 mg cap	1	OTC Over the Counter
dulcolax stool softener 100 mg cap	1	OTC Over the Counter
easy-lax 100 mg cap	1	OTC Over the Counter
eq stool softener 100 mg cap	1	OTC Over the Counter
eq stool softener 250 mg cap	1	OTC Over the Counter
eql stool softener 100 mg cap	1	OTC Over the Counter
ft stool softener 100 mg cap	1	OTC Over the Counter
ft stool softener 100 mg tab	1	OTC Over the Counter
ft stool softener 250 mg cap	1	OTC Over the Counter
gnp stool softener 100 mg cap	1	OTC Over the Counter
gnp stool softener 240 mg cap	1	OTC Over the Counter
gnp stool softener 250 mg cap	1	OTC Over the Counter
goodsense stool softener 100 mg cap	1	OTC Over the Counter
healthy mama move it along 100 mg tab	1	OTC Over the Counter
hm stool softener 100 mg cap	1	OTC Over the Counter
hm stool softener 100 mg tab	1	OTC Over the Counter
hm stool softener 250 mg cap	1	OTC Over the Counter
kls stool softener 100 mg cap	1	OTC Over the Counter
ks stool softener 100 mg cap	1	OTC Over the Counter
laxa basic 100 mg cap	1	OTC Over the Counter
mm stool softener laxative 100 mg cap	1	OTC Over the Counter
phillips stool softener 100 mg cap	1	OTC Over the Counter
promolaxin 100 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
px docusate sodium 100 mg cap	1	OTC Over the Counter
qc docusate calcium 240 mg cap	1	OTC Over the Counter
qc stool softener 100 mg cap	1	OTC Over the Counter
qc stool softener 250 mg cap	1	OTC Over the Counter
ra col-rite 100 mg cap	1	OTC Over the Counter
ra col-rite 250 mg cap	1	OTC Over the Counter
ra stool softener 100 mg cap	1	OTC Over the Counter
sb docusate sodium 100 mg cap	1	OTC Over the Counter
sb stool softener 240 mg cap	1	OTC Over the Counter
sm docusate calcium 240 mg cap	1	OTC Over the Counter
sm stool softener 100 mg cap	1	OTC Over the Counter
sm stool softener 100 mg tab	1	OTC Over the Counter
sm stool softener 240 mg cap	1	OTC Over the Counter
sm stool softener 250 mg cap	1	OTC Over the Counter
stool softener 100 mg cap	1	OTC Over the Counter
stool softener 100 mg tab	1	OTC Over the Counter
stool softener 240 mg cap	1	OTC Over the Counter
stool softener 250 mg cap	1	OTC Over the Counter
stool softener laxative 100 mg cap	1	OTC Over the Counter
stool softener laxative 250 mg cap	1	OTC Over the Counter
surfak 240 mg cap	1	OTC Over the Counter
MACROLIDES		
AZITHROMYCIN		
azithromycin 100 mg/5ml recon susp	1	QL 30 / Rx
azithromycin 200 mg/5ml recon susp	1	QL 60 / Rx
azithromycin 250 mg tab	1	QL 6 / 5 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
azithromycin 500 mg tab	1	QL 5 / Rx
azithromycin 600 mg tab	1	QL 8.7 / 30 day(s)
CLARITHROMYCIN		
CLARITHROMYCIN 125 MG/5ML RECON SUSP	1	
clarithromycin 250 mg tab	1	
CLARITHROMYCIN 250 MG/5ML RECON SUSP	1	
clarithromycin 500 mg tab	1	
ERYTHROMYCINS		
ery-tab 250 mg tab dr	2	
ery-tab 333 mg tab dr	2	
ery-tab 500 mg tab dr	2	
erythromycin 250 mg tab dr	2	
erythromycin 333 mg tab dr	2	
erythromycin 500 mg tab dr	2	
erythromycin base 250 mg tab	2	
erythromycin base 250 mg tab dr	2	
erythromycin base 333 mg tab dr	2	
erythromycin base 500 mg tab	2	
erythromycin base 500 mg tab dr	2	
erythromycin ethylsuccinate 200 mg/5ml recon susp	2	
erythromycin ethylsuccinate 400 mg/5ml recon susp	2	
FIDAXOMICIN		
DIFICID 200 MG TAB	2	
DIFICID 40 MG/ML RECON SUSP	2	
MEDICAL DEVICES AND SUPPLIES		
BLOOD PRESSURE DEVICES		
10 SERIES BP MONITOR/UPPER ARM DEVICE	1	OTC Over the Counter
10 SERIES+ BP MONITR/UPPER ARM DEVICE	1	OTC Over the Counter
3 SERIES BP MONITOR/UPPER ARM DEVICE	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
3 SERIES BP MONITOR/WRIST DEVICE	1	OTC Over the Counter
ADVANCED ONE STEP BP MONITOR MISC	1	OTC Over the Counter
ADVOCATE ARM BPM DEVICE	1	OTC Over the Counter
ADVOCATE MEMORY BP MONITOR MISC	1	OTC Over the Counter
BD ASSURE BPM/AUTO ARM CUFF MISC	1	OTC Over the Counter
BD ASSURE BPM/AUTO WRIST CUFF MISC	1	OTC Over the Counter
BD ASSURE BPM/DELUXE ARM CUFF MISC	1	OTC Over the Counter
BD ASSURE BPM/MANUAL ARM CUFF MISC	1	OTC Over the Counter
BD ASSURE BPM/PORT WRISTWATCH MISC	1	OTC Over the Counter
BLOOD PRESSURE KIT DEVICE	1	OTC Over the Counter
BLOOD PRESSURE KIT KIT	1	OTC Over the Counter
BLOOD PRESSURE MON/AUTO/WRIST DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR MISC	1	OTC Over the Counter
BLOOD PRESSURE MONITOR 3 DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR 7 DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR AUTOMAT DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/ARM DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/L CUFF MISC	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/M CUFF MISC	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/PRM ARM DEVICE	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/S CUFF MISC	1	OTC Over the Counter
BLOOD PRESSURE MONITOR/WRIST DEVICE	1	OTC Over the Counter
BLOOD PRESSURE UNIT MISC	1	OTC Over the Counter
CARETOUCH BP ARM MONITOR DEVICE	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH BP WRIST MONITOR DEVICE	1	OTC Over the Counter
CARETOUCH SLIM BP WRIST MONITO DEVICE	1	OTC Over the Counter
CARETOUCH VERSA BP ARM MONITOR DEVICE	1	OTC Over the Counter
CLEVER CHOICE BP MONITOR/ARM DEVICE	1	OTC Over the Counter
CLEVER CHOICE BP MONITOR/WRIST DEVICE	1	OTC Over the Counter
CVS ADVANCED BP MONITOR DEVICE	1	OTC Over the Counter
CVS BLOOD PRESSURE MONITOR MISC	1	OTC Over the Counter
CVS SERIES 100 BLOOD PRESSURE DEVICE	1	OTC Over the Counter
CVS SERIES 400 BLOOD PRESSURE DEVICE	1	OTC Over the Counter
CVS SERIES 400W BLOOD PRESSURE DEVICE	1	OTC Over the Counter
CVS SERIES 600 BLOOD PRESSURE DEVICE	1	OTC Over the Counter
CVS SERIES 600W BLOOD PRESSURE DEVICE	1	OTC Over the Counter
CVS SERIES 800 BLOOD PRESSURE DEVICE	1	OTC Over the Counter
EQ BP MONITOR WRIST DEVICE	1	OTC Over the Counter
FORA P20 BP MONITOR SYSTEM DEVICE	1	OTC Over the Counter
FORA TEST N' GO BP DEVICE	1	OTC Over the Counter
GNP BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
H-E-B INCONTROL BP MONITOR MISC	1	OTC Over the Counter
H-E-B INCONTROL DELUXE AUTO BP DEVICE	1	OTC Over the Counter
H-E-B INCONTROL PREMIUM BP DEVICE	1	OTC Over the Counter
HEALTH SENSE BP MONITOR DEVICE	1	OTC Over the Counter
HEALTHSMART BP MONITOR/WRIST DEVICE	1	OTC Over the Counter
HM BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
HM BLOOD PRESSURE SERIES 200 DEVICE	1	OTC Over the Counter
KROGER BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MICROLIFE BP MONITOR DEVICE	1	OTC Over the Counter
MICROLIFE BPM6 PREMIUM MONITOR DEVICE	1	OTC Over the Counter
MICROLIFE DELUXE BP MONITOR DEVICE	1	OTC Over the Counter
MICROLIFE WRIST BP MONITOR DEVICE	1	OTC Over the Counter
OMRON 10 SERIES BP MONITOR DEVICE	1	OTC Over the Counter
OMRON 3 SERIES BP MONITOR DEVICE	1	OTC Over the Counter
OMRON 5 SERIES BP MONITOR DEVICE	1	OTC Over the Counter
OMRON 7 SERIES BP MONITOR DEVICE	1	OTC Over the Counter
OMRON WRIST BP MONITOR DEVICE	1	OTC Over the Counter
PRO HEALTH MINI TALKING MONITR DEVICE	1	OTC Over the Counter
PRO HEALTH TRACK BP MONITOR DEVICE	1	OTC Over the Counter
PROCARE UPPER ARM BP MONITOR DEVICE	1	OTC Over the Counter
PROCARE WRIST BP MONITOR DEVICE	1	OTC Over the Counter
QC BLOOD PRESSURE MONITOR MISC	1	OTC Over the Counter
RA BLOOD PRESSURE CUFF MONITOR DEVICE	1	OTC Over the Counter
RA BLOOD PRESSURE CUFF MONITOR MISC	1	OTC Over the Counter
RELION BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
RELION PREMIUM MONITOR DEVICE	1	OTC Over the Counter
SELF-TAKING BLOOD PRESSURE MISC	1	OTC Over the Counter
SM BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
SM BLOOD PRESSURE MONITOR MISC	1	OTC Over the Counter
SM BLOOD PRESSURE SERIES 200 DEVICE	1	OTC Over the Counter
SM BLOOD PRESSURE SERIES 200W DEVICE	1	OTC Over the Counter
SM BLOOD PRESSURE SERIES 600W DEVICE	1	OTC Over the Counter
SM BLOOD PRESSURE SERIES 800 DEVICE	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SM WRIST CUFF BP MONITOR MISC	1	OTC Over the Counter
SPHYGMOMANOMETER MISC	1	OTC Over the Counter
SURELIFE BP MONITOR/ARM DEVICE	1	OTC Over the Counter
SURELIFE BP MONITOR/WRIST DEVICE	1	OTC Over the Counter
TALKING SENSE BP MONITOR DEVICE	1	OTC Over the Counter
TGT BLOOD PRESSURE MONITOR DEVICE	1	OTC Over the Counter
TRUE HEALTH SENSE BP MONITOR DEVICE	1	OTC Over the Counter
WOMENS ADV BP MONITOR/UPPR ARM MISC	1	OTC Over the Counter
WRIST BLOOD PRESSURE MONITOR MISC	1	OTC Over the Counter
CERVICAL CAPS		
FEMCAP 22 MM DEVICE	1	ACA Affordable Care Act
FEMCAP 26 MM DEVICE	1	ACA Affordable Care Act
FEMCAP 30 MM DEVICE	1	ACA Affordable Care Act
CONDOMS - FEMALE		
FC FEMALE CONDOM MISC	1	ACA Affordable Care Act OTC Over the Counter
FC2 FEMALE CONDOM MISC	1	ACA Affordable Care Act OTC Over the Counter
CONDOMS - MALE		
AIMSCO LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
DUREX EXTRA SENSITIVE THIN DEVICE	1	ACA Affordable Care Act OTC Over the Counter
FANTASY LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
FANTASY LUBRICATED/SPERMICIDE MISC	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
K-Y ME & YOU EXTRA LUBRICATED DEVICE	1	ACA Affordable Care Act OTC Over the Counter
K-Y ME & YOU INTENSE DEVICE	1	ACA Affordable Care Act OTC Over the Counter
KAMELEON LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO COLORS DEVICE	1	ACA Affordable Care Act OTC Over the Counter
KIMONO MAXX-LARGE FLARE MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO MICRO THIN MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO MICRO THIN PLUS MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO PLUS MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO PS MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO PS PLUS MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO SENSATION MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO SENSATION PLUS MISC	1	ACA Affordable Care Act OTC Over the Counter
KIMONO SPECIAL DEVICE	1	ACA Affordable Care Act OTC Over the Counter
MAXX MISC	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAXX PLUS MISC	1	ACA Affordable Care Act OTC Over the Counter
PREMIUM CONDOMS LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
REALITY LATEX CONDOMS MISC	1	ACA Affordable Care Act OTC Over the Counter
REALITY LATEX/ULTRA TEXTURED DEVICE	1	ACA Affordable Care Act OTC Over the Counter
REALITY LATEX/ULTRA THIN DEVICE	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX COLOR CONDOMS + LUBE MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUB/RIBBED/STUDDED MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUB/SPERMICIDE EX ST MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUB/SPERMICIDE XL MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUBRICATED EX LARGE MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUBRICATED EXTRA ST MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX LUBRICATED/SPERMICIDE MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX NATURAL CONDOMS + LUBE MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX NON-LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUSTEX RIA LUB/SPERMICIDE MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX RIA LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX RIA NON-LUBRICATED MISC	1	ACA Affordable Care Act OTC Over the Counter
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	1	ACA Affordable Care Act OTC Over the Counter
DIAPHRAGMS		
CAYA DIAPHRAGM	1	ACA Affordable Care Act
OMNIFLEX DIAPHRAGM DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM	1	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM	1	ACA Affordable Care Act
GLUCOSE MONITORING TEST SUPPLIES		
1ST TIER UNILET COMFORTOUCH MISC	1	OTC Over the Counter
ACCU-CHEK FASTCLIX LANCET KIT	1	OTC Over the Counter
ACCU-CHEK FASTCLIX LANCETS MISC	1	OTC Over the Counter
ACCU-CHEK SAFE-T PRO LANCETS MISC	1	OTC Over the Counter
ACCU-CHEK SOFTCLIX LANCET DEV KIT	1	OTC Over the Counter
ACCU-CHEK SOFTCLIX LANCETS MISC	1	OTC Over the Counter
ACTI-LANCE 28G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACTI-LANCE LITE LANCETS 28G MISC	1	OTC Over the Counter
ACTI-LANCE SPECIAL LANCETS 17G MISC	1	OTC Over the Counter
ACTI-LANCE UNIVERSAL 23G MISC	1	OTC Over the Counter
ADJUSTABLE LANCING DEVICE MISC	1	OTC Over the Counter
ADVANCED MOBILE LANCET MISC	1	OTC Over the Counter
ADVOCATE LANCETS MISC	1	OTC Over the Counter
ADVOCATE LANCETS 30G MISC	1	OTC Over the Counter
ADVOCATE LANCING DEVICE MISC	1	OTC Over the Counter
ADVOCATE RAPID-SAFE LANCING MISC	1	OTC Over the Counter
ADVOCATE SAFETY LANCETS MISC	1	OTC Over the Counter
ADVOCATE SAFETY LANCETS 26G MISC	1	OTC Over the Counter
AGAMATRIX ULTRA-THIN LANCETS MISC	1	OTC Over the Counter
AIMSCO TWIST LANCETS 32G MISC	1	OTC Over the Counter
AIMSCO TWIST LANCETS 33G MISC	1	OTC Over the Counter
ALTERNATE SITE LANCING DEVICE MISC	1	OTC Over the Counter
AQUALANCE LANCETS 30G MISC	1	OTC Over the Counter
ASSURE COMFORT LANCETS 28G MISC	1	OTC Over the Counter
ASSURE HAEMOLANCE PLUS HIGH MISC	1	OTC Over the Counter
ASSURE HAEMOLANCE PLUS LOW MISC	1	OTC Over the Counter
ASSURE HAEMOLANCE PLUS MICRO MISC	1	OTC Over the Counter
ASSURE HAEMOLANCE PLUS NORMAL MISC	1	OTC Over the Counter
ASSURE HAEMOLANCE PLUS PED MISC	1	OTC Over the Counter
ASSURE LANCE LANCETS MISC	1	OTC Over the Counter
ASSURE LANCE LANCETS 21G MISC	1	OTC Over the Counter
ASSURE LANCE PLUS SAFETY 25G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASSURE LANCE PLUS SAFETY 30G MISC	1	OTC Over the Counter
ASSURE LANCE SAFETY LANCET 28G MISC	1	OTC Over the Counter
AURORA LANCET SUPER THIN 30G MISC	1	OTC Over the Counter
AURORA LANCET THIN 23G MISC	1	OTC Over the Counter
AUTO-LANCET MISC	1	OTC Over the Counter
AUTO-LANCET MINI MISC	1	OTC Over the Counter
AUTOLET II CLINISAFE KIT	1	OTC Over the Counter
AUTOLET LANCING DEVICE MISC	1	OTC Over the Counter
AUTOLET LITE CLINISAFE KIT	1	OTC Over the Counter
AUTOLET LITE STARTER PACK KIT	1	OTC Over the Counter
AUTOLET MINI MISC	1	OTC Over the Counter
AUTOLET PLATFORMS MISC	1	OTC Over the Counter
AUTOLET PLUS MISC	1	OTC Over the Counter
BD LANCET ULTRAFINE 30G MISC	1	OTC Over the Counter
BD LANCET ULTRAFINE 33G MISC	1	OTC Over the Counter
BD MICROTAINER LANCETS MISC	1	OTC Over the Counter
BULLSEYE MINI SAFETY LANCETS MISC	1	OTC Over the Counter
BULLSEYE SAFETY LANCETS MISC	1	OTC Over the Counter
CARDIOCOM LANCING DEVICE MISC	1	OTC Over the Counter
CAREONE ADVANCED LANCING DEV MISC	1	OTC Over the Counter
CAREONE LANCET SUPER THIN 30G MISC	1	OTC Over the Counter
CAREONE LANCET THIN 23G MISC	1	OTC Over the Counter
CARESENS LANCETS MISC	1	OTC Over the Counter
CARESENS LANCETS 30G MISC	1	OTC Over the Counter
CARETOUCH LANCING/EJECTOR MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH SAFETY LANCETS MISC	1	OTC Over the Counter
CARETOUCH SAFETY LANCETS 26G MISC	1	OTC Over the Counter
CARETOUCH TWIST LANCETS 28G MISC	1	OTC Over the Counter
CARETOUCH TWIST LANCETS 30G MISC	1	OTC Over the Counter
CARETOUCH TWIST LANCETS 33G MISC	1	OTC Over the Counter
CARETOUCH TWIST MC LANCETS 30G MISC	1	OTC Over the Counter
CLEANLET LANCETS 28G MISC	1	OTC Over the Counter
CLEVER CHEK LANCETS MISC	1	OTC Over the Counter
CLEVER CHOICE COMFORT EZ MISC	1	OTC Over the Counter
CLEVER CHOICE LANCETS 21G MISC	1	OTC Over the Counter
CLEVER CHOICE LANCETS 23G MISC	1	OTC Over the Counter
CLEVER CHOICE LANCETS 28G MISC	1	OTC Over the Counter
COAGUCHEK LANCETS MISC	1	OTC Over the Counter
COMFORT ASSURED LANCETS 28G MISC	1	OTC Over the Counter
COMFORT ASSURED LANCETS 33G MISC	1	OTC Over the Counter
COMFORT LANCETS MISC	1	OTC Over the Counter
COMFORT TOUCH LANCETS 31G MISC	1	OTC Over the Counter
COMFORT TOUCH PLUS LANCETS 28G MISC	1	OTC Over the Counter
COMFORT TOUCH PLUS LANCETS 30G MISC	1	OTC Over the Counter
CVS LANCETS 21G MISC	1	OTC Over the Counter
CVS LANCETS MICRO THIN 33G MISC	1	OTC Over the Counter
CVS LANCETS ORIGINAL MISC	1	OTC Over the Counter
CVS LANCETS THIN 26G MISC	1	OTC Over the Counter
CVS LANCETS ULTRA THIN 30G MISC	1	OTC Over the Counter
CVS LANCETS ULTRA-THIN 30G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CVS LANCING DEVICE MISC	1	OTC Over the Counter
CVS ULTRA THIN LANCETS MISC	1	OTC Over the Counter
DEXCOM G5 MOBILE TRANSMITTER MISC	1	QL 1 / 84 day(s) ST
DEXCOM G5 RECEIVER KIT DEVICE	1	ST QLC 1 / 365 day(s)
DEXCOM G6 RECEIVER DEVICE	1	ST QLC 1 / 365 day(s)
DEXCOM G6 SENSOR MISC	1	QL 3 / 30 day(s) ST
DEXCOM G6 TRANSMITTER MISC	1	QL 1 / 90 day(s) ST
DEXCOM G7 RECEIVER DEVICE	1	ST QLC 1 / 365 day(s)
DEXCOM G7 SENSOR MISC	1	QL 3 / 30 day(s) ST
DIATHRIVE LANCET ULTRA THIN 30 MISC	1	OTC Over the Counter
DIATHRIVE LANCETS MISC	1	OTC Over the Counter
DIATHRIVE LANCING DEVICE MISC	1	OTC Over the Counter
DROPLET GENTEEL LANCING DEVICE MISC	1	OTC Over the Counter
DROPLET LANCETS ULTRA THIN 30G MISC	1	OTC Over the Counter
DROPLET LANCING DEVICE MISC	1	OTC Over the Counter
DROPLET PERSONAL LANCETS 30G MISC	1	OTC Over the Counter
DRUG MART LANCETS THIN 26G MISC	1	OTC Over the Counter
DRUG MART LANCING DEVICE MISC	1	OTC Over the Counter
DRUG MART ON-THE-GO LANCET 30G MISC	1	OTC Over the Counter
DRUG MART UNILET LANCETS 28G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DRUG MART UNILET LANCETS 30G MISC	1	OTC Over the Counter
DRUG MART UNILET LANCETS 33G MISC	1	OTC Over the Counter
E-Z JECT LANCET MICRO-THIN 33G MISC	1	OTC Over the Counter
E-Z JECT LANCET SUPER THIN 30G MISC	1	OTC Over the Counter
E-Z JECT LANCETS MISC	1	OTC Over the Counter
E-Z JECT LANCETS 21G MISC	1	OTC Over the Counter
E-Z JECT LANCETS THIN 26G MISC	1	OTC Over the Counter
EASY COMFORT LANCETS MISC	1	OTC Over the Counter
EASY COMFORT LANCETS TWIST TOP MISC	1	OTC Over the Counter
EASY MINI EJECT LANCING DEVICE MISC	1	OTC Over the Counter
EASY MINI LANCING DEVICE MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 21G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 23G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 26G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 28G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 28G/TWIST MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 30G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 30G/TWIST MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 32G MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 32G/TWIST MISC	1	OTC Over the Counter
EASY TOUCH LANCETS 33G/TWIST MISC	1	OTC Over the Counter
EASY TOUCH LANCING DEVICE MISC	1	OTC Over the Counter
EASY TOUCH SAFETY LANCETS 21G MISC	1	OTC Over the Counter
EASY TOUCH SAFETY LANCETS 23G MISC	1	OTC Over the Counter
EASY TOUCH SAFETY LANCETS 26G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SAFETY LANCETS 28G MISC	1	OTC Over the Counter
EASY TWIST & CAP LANCETS MISC	1	OTC Over the Counter
EMBRACE LANCETS ULTRA THIN 30G MISC	1	OTC Over the Counter
EMBRACE LANCING DEVICE/EJECTOR MISC	1	OTC Over the Counter
EMBRACE PRESSURE ACTIVATED 21G MISC	1	OTC Over the Counter
EMBRACE PRESSURE ACTIVATED 28G MISC	1	OTC Over the Counter
EQL COLOR LANCETS 21G MISC	1	OTC Over the Counter
EQL COLOR LANCETS MICRO 33G MISC	1	OTC Over the Counter
EQL SUPER THIN LANCETS 30G MISC	1	OTC Over the Counter
EQL THIN LANCETS 26G MISC	1	OTC Over the Counter
EZ-LETS LANCETS 21G MISC	1	OTC Over the Counter
EZ-LETS LANCETS 26G MISC	1	OTC Over the Counter
EZ-LETS LANCETS 28G MISC	1	OTC Over the Counter
EZ-LETS LANCETS 30G MISC	1	OTC Over the Counter
FIFTY50 SAFETY SEAL LANCETS MISC	1	OTC Over the Counter
FIFTY50 UNILET LANCETS 33G MISC	1	OTC Over the Counter
FINE 30 MISC	1	OTC Over the Counter
FINGERSTIX LANCETS MISC	1	OTC Over the Counter
FORA LANCETS MISC	1	OTC Over the Counter
FORA LANCING DEVICE MISC	1	OTC Over the Counter
FREDS PHARMACY AUTOLET LANCING MISC	1	OTC Over the Counter
FREDS PHARMACY UNILET LANC 28G MISC	1	OTC Over the Counter
FREDS PHARMACY UNILET LANC 30G MISC	1	OTC Over the Counter
FREESTYLE LANCETS MISC	1	OTC Over the Counter
FREESTYLE UNISTICK II LANCETS MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENTEEL BUTTERFLY TOUCH LANCET MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (BLUE) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (CLEAR) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (GREEN) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (ORANGE) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (RAINBOW) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (VIOLET) MISC	1	OTC Over the Counter
GENTEEL CONTACT TIPS (YELLOW) MISC	1	OTC Over the Counter
GENTEEL LANCING DEVICE (GOLD) MISC	1	OTC Over the Counter
GENTEEL LANCING DEVICE(PLATNM) MISC	1	OTC Over the Counter
GENTEEL LANCING DEVICE(SILVER) MISC	1	OTC Over the Counter
GENTEEL LANCING KIT (BLUE) KIT	1	OTC Over the Counter
GENTEEL NOZZLES MISC	1	OTC Over the Counter
GENTEEL PLUS LANCING (BLACK) MISC	1	OTC Over the Counter
GENTEEL PLUS LANCING (PURPLE) MISC	1	OTC Over the Counter
GENTEEL PLUS LANCING (WHITE) MISC	1	OTC Over the Counter
GENTEEL PLUS LANCING DEV(BLUE) MISC	1	OTC Over the Counter
GENTEEL PLUS LANCING DEV(PINK) MISC	1	OTC Over the Counter
GENTLE-LET GP LANCETS MISC	1	OTC Over the Counter
GENTLE-LET LANCETS MISC	1	OTC Over the Counter
GENTLE-LET PLATFORMS MISC	1	OTC Over the Counter
GLOBAL INJECT EASE LANCETS 28G MISC	1	OTC Over the Counter
GLOBAL INJECT EASE LANCETS 30G MISC	1	OTC Over the Counter
GLOBAL LANCING DEVICE MISC	1	OTC Over the Counter
GLUCOCOM LANCETS 28G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLUCOCOM LANCETS 30G MISC	1	OTC Over the Counter
GLUCOCOM LANCETS 33G MISC	1	OTC Over the Counter
GNP LANCETS 21G MISC	1	OTC Over the Counter
GNP LANCETS MICRO THIN 33G MISC	1	OTC Over the Counter
GNP LANCETS SUPER THIN 30G MISC	1	OTC Over the Counter
GNP LANCETS THIN 26G MISC	1	OTC Over the Counter
GNP LANCING SYSTEM DEVICE MISC	1	OTC Over the Counter
GNP STERILE LANCETS 28G MISC	1	OTC Over the Counter
GNP STERILE LANCETS 30G MISC	1	OTC Over the Counter
GNP STERILE LANCETS 33G MISC	1	OTC Over the Counter
GOJJI LANCING DEVICE/CLEAR CAP MISC	1	OTC Over the Counter
GOJJI STERILE LANCETS MISC	1	OTC Over the Counter
GOODSENSE COLOR LANCETS 33G MISC	1	OTC Over the Counter
GOODSENSE LANCETS 26G UNIV MISC	1	OTC Over the Counter
GOODSENSE LANCETS 30G MISC	1	OTC Over the Counter
GOODSENSE LANCETS 30G UNIV MISC	1	OTC Over the Counter
GOODSENSE LANCETS 33G MISC	1	OTC Over the Counter
GOODSENSE LANCETS 33G UNIV MISC	1	OTC Over the Counter
GOODSENSE LANCING DEVICE MISC	1	OTC Over the Counter
H-E-B INCONTROL ADV LANCING MISC	1	OTC Over the Counter
H-E-B INCONTROL LANCETS 28G MISC	1	OTC Over the Counter
H-E-B INCONTROL LANCETS 30G MISC	1	OTC Over the Counter
H-E-B INCONTROL LANCETS 33G MISC	1	OTC Over the Counter
HAEMOLANCE MISC	1	OTC Over the Counter
HAEMOLANCE LOW FLOW LANCETS MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAEMOLANCE PLUS MISC	1	OTC Over the Counter
HAEMOLANCE PLUS HIGH FLOW MISC	1	OTC Over the Counter
HAEMOLANCE PLUS LOW FLOW MISC	1	OTC Over the Counter
HAEMOLANCE PLUS MAX FLOW MISC	1	OTC Over the Counter
HAEMOLANCE PLUS PEDIATRIC FLOW MISC	1	OTC Over the Counter
HEALTH CARE LANCING DEVICE MISC	1	OTC Over the Counter
HEALTHY ACCENTS LANCING DEVICE MISC	1	OTC Over the Counter
HEALTHY ACCENTS UNILET LANCETS MISC	1	OTC Over the Counter
HY-VEE LANCETS MISC	1	OTC Over the Counter
HY-VEE THIN LANCETS MISC	1	OTC Over the Counter
HYPOLANCE AST LANCING KIT	1	OTC Over the Counter
IN TOUCH LANCING DEVICE MISC	1	OTC Over the Counter
IN TOUCH STERILE LANCETS 30G MISC	1	OTC Over the Counter
KINNEY LANCETS MISC	1	OTC Over the Counter
KINNEY THIN LANCETS MISC	1	OTC Over the Counter
KROGER AUTOLET LANCING DEVICE MISC	1	OTC Over the Counter
KROGER HEALTHPRO LANCET 26G MISC	1	OTC Over the Counter
KROGER LANCETS MISC	1	OTC Over the Counter
KROGER LANCETS 21G MISC	1	OTC Over the Counter
KROGER LANCETS MICRO THIN 33G MISC	1	OTC Over the Counter
KROGER LANCETS SUPER THIN MISC	1	OTC Over the Counter
KROGER LANCETS THIN MISC	1	OTC Over the Counter
KROGER LANCETS THIN 26G MISC	1	OTC Over the Counter
KROGER LANCETS ULTRATHIN 30G MISC	1	OTC Over the Counter
KROGER LANCING DEVICE MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LANCET DEVICE MISC	1	OTC Over the Counter
LANCET DEVICE WITH EJECTOR MISC	1	OTC Over the Counter
LANCET TRANSPORTER CASE MISC	1	OTC Over the Counter
LANCETS MISC	1	OTC Over the Counter
LANCETS 30G MISC	1	OTC Over the Counter
LANCETS 33G MISC	1	OTC Over the Counter
LANCETS MICRO THIN 33G MISC	1	OTC Over the Counter
LANCETS SUPER THIN 28G MISC	1	OTC Over the Counter
LANCETS THIN MISC	1	OTC Over the Counter
LANCETS ULTRA FINE MISC	1	OTC Over the Counter
LANCETS ULTRA THIN MISC	1	OTC Over the Counter
LANCETS ULTRA THIN 30G MISC	1	OTC Over the Counter
LANCING DEVICE MISC	1	OTC Over the Counter
LANZO MISC	1	OTC Over the Counter
LEADER ADVANCED LANCING DEVICE MISC	1	OTC Over the Counter
LIBERTY MEDICAL LANCETS MISC	1	OTC Over the Counter
LIBERTY MINI LANCING DEVICE MISC	1	OTC Over the Counter
LIFESCAN UNISTIK 2 MISC	1	OTC Over the Counter
LIFESCAN UNISTIK II LANCETS MISC	1	OTC Over the Counter
LITE TOUCH LANCETS MISC	1	OTC Over the Counter
LITE TOUCH LANCING PEN MISC	1	OTC Over the Counter
LITETOUCH LANCETS MISC	1	OTC Over the Counter
LIVE BETTER ADV LANCING DEVICE MISC	1	OTC Over the Counter
LIVE BETTER LANCET SUPER THIN MISC	1	OTC Over the Counter
LIVE BETTER LANCET ULTRA THIN MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LONGS LANCETS STANDARD MISC	1	OTC Over the Counter
LONGS LANCETS THIN MISC	1	OTC Over the Counter
LONGS LANCETS ULTRA THIN MISC	1	OTC Over the Counter
MEDICHOICE SAFETY LANCET MISC	1	OTC Over the Counter
MEDICHOICE SAFETY LANCET EXTRA MISC	1	OTC Over the Counter
MEDICHOICE SAFETY LANCET NORM MISC	1	OTC Over the Counter
MEDISENSE THIN LANCETS MISC	1	OTC Over the Counter
MEDLANCE EXTRA 21G MISC	1	OTC Over the Counter
MEDLANCE LITE 25G MISC	1	OTC Over the Counter
MEDLANCE PLUS EXTRA 21G MISC	1	OTC Over the Counter
MEDLANCE PLUS LANCETS MISC	1	OTC Over the Counter
MEDLANCE PLUS LITE 25G MISC	1	OTC Over the Counter
MEDLANCE PLUS SPECIAL 0.8MM MISC	1	OTC Over the Counter
MEDLANCE PLUS SUPERLITE 30G MISC	1	OTC Over the Counter
MEDLANCE PLUS UNIVERSAL 21G MISC	1	OTC Over the Counter
MEDLANCE UNIVERSAL 21G MISC	1	OTC Over the Counter
MEIJER LANCETS MISC	1	OTC Over the Counter
MEIJER LANCETS THIN MISC	1	OTC Over the Counter
MEIJER LANCETS UNIVERSAL 21G MISC	1	OTC Over the Counter
MEIJER LANCETS UNIVERSAL 30G MISC	1	OTC Over the Counter
MEIJER LANCETS UNIVERSAL 33G MISC	1	OTC Over the Counter
MEIJER SUPER THIN LANCETS MISC	1	OTC Over the Counter
MICROLET LANCETS MISC	1	OTC Over the Counter
MICROLET NEXT LANCING DEVICE MISC	1	OTC Over the Counter
MINI LANCING DEVICE MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MM LANCING DEVICE MISC	1	OTC Over the Counter
MM TWIST LANCETS MISC	1	OTC Over the Counter
MONOLET LANCETS MISC	1	OTC Over the Counter
MONOLET OPD LANCETS MISC	1	OTC Over the Counter
MONOLETTOR SAFETY LANCETS MISC	1	OTC Over the Counter
MPD SAFETY LANCET 21G MISC	1	OTC Over the Counter
MPD SAFETY LANCET 23G MISC	1	OTC Over the Counter
MPD SAFETY LANCET 28G MISC	1	OTC Over the Counter
MPD SAFETY LANCET 30G MISC	1	OTC Over the Counter
MULTI-LANCET DEVICE MISC	1	OTC Over the Counter
MULTI-LANCET DEVICE 2 KIT	1	OTC Over the Counter
MYGLUCOHEALTH LANCETS 30G MISC	1	OTC Over the Counter
NOVA SAFETY LANCETS 23G MISC	1	OTC Over the Counter
NOVA SAFETY LANCETS 28G MISC	1	OTC Over the Counter
NOVA SUREFLEX LANCETS MISC	1	OTC Over the Counter
NOVA SUREFLEX LANCING DEVICE MISC	1	OTC Over the Counter
ON CALL LANCETS MISC	1	OTC Over the Counter
ON CALL LANCING DEVICE MISC	1	OTC Over the Counter
ON CALL PLUS LANCETS MISC	1	OTC Over the Counter
ON CALL PLUS LANCING DEVICE MISC	1	OTC Over the Counter
ONETOUCH CLUB LANCETS FINE PT MISC	1	OTC Over the Counter
ONETOUCH DELICA LANCETS 30G MISC	1	OTC Over the Counter
ONETOUCH DELICA LANCETS 33G MISC	1	OTC Over the Counter
ONETOUCH DELICA LANCING DEV MISC	1	OTC Over the Counter
ONETOUCH DELICA PLUS LANCET30G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONETOUCH DELICA PLUS LANCET33G MISC	1	OTC Over the Counter
ONETOUCH DELICA PLUS LANCING MISC	1	OTC Over the Counter
ONETOUCH DELICA SAFETY LANCING MISC	1	OTC Over the Counter
ONETOUCH FINEPOINT LANCETS MISC	1	OTC Over the Counter
ONETOUCH SURESOFT LANCING DEV MISC	1	OTC Over the Counter
ONETOUCH ULTRA 2 W/DEVICE KIT	1	QL 1 / 365 day(s) G Must use manufacturer's voucher OTC Over the Counter
ONETOUCH ULTRA CONTROL LIQUID	1	OTC Over the Counter
ONETOUCH ULTRASOFT 2 LANCETS MISC	1	OTC Over the Counter
ONETOUCH ULTRASOFT LANCETS MISC	1	OTC Over the Counter
ONETOUCH VERIO LIQUID	1	OTC Over the Counter
ONETOUCH VERIO FLEX SYSTEM W/DEVICE KIT	1	QL 1 / 365 day(s) G Must use manufacturer's voucher OTC Over the Counter
ONETOUCH VERIO HIGH LIQUID	1	OTC Over the Counter
ONETOUCH VERIO REFLECT W/DEVICE KIT	1	QL 1 / 365 day(s) G Must use manufacturer's voucher OTC Over the Counter
PC LANCETS SUPER THIN 30G MISC	1	OTC Over the Counter
PENLET II BLOOD SAMPLER KIT	1	OTC Over the Counter
PENLET II REPLACEMENT CAP MISC	1	OTC Over the Counter
PERFECT LANCETS 28G MISC	1	OTC Over the Counter
PERFECT LANCETS 30G MISC	1	OTC Over the Counter
PHARMACIST CHOICE LANCETS MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHARMACY COUNTER LANCETS MISC	1	OTC Over the Counter
PIP LANCETS 28G MISC	1	OTC Over the Counter
PIP LANCETS 30G MISC	1	OTC Over the Counter
PRECISION THINS GP LANCETS MISC	1	OTC Over the Counter
PREFERRED PLUS LANCETS COLORED MISC	1	OTC Over the Counter
PREFERRED PLUS LANCETS THIN MISC	1	OTC Over the Counter
PRESSURE ACTIVAT SAFETY LANCET MISC	1	OTC Over the Counter
PRO COMFORT LANCETS 30G MISC	1	OTC Over the Counter
PRO COMFORT LANCETS 31G MISC	1	OTC Over the Counter
PRO COMFORT SAFETY LANCETS 30G MISC	1	OTC Over the Counter
PRODIGY LANCETS 28G MISC	1	OTC Over the Counter
PRODIGY LANCING DEVICE MISC	1	OTC Over the Counter
PRODIGY SAFETY LANCETS 26G MISC	1	OTC Over the Counter
PRODIGY TWIST TOP LANCETS 28G MISC	1	OTC Over the Counter
PSS SELECT GP LANCETS MISC	1	OTC Over the Counter
PSS SELECT PLATFORMS MISC	1	OTC Over the Counter
PSS SELECT SAFETY LANCETS MISC	1	OTC Over the Counter
PURE COMFORT LANCETS 30G MISC	1	OTC Over the Counter
PUSH BUTTON SAFETY LANCETS MISC	1	OTC Over the Counter
PUSH BUTTON SAFETY LANCETS 28G MISC	1	OTC Over the Counter
PX ADVANCED LANCING DEVICE MISC	1	OTC Over the Counter
PX LANCET AUTO INJECTOR MISC	1	OTC Over the Counter
PX LANCETS MICROTHIN 33G MISC	1	OTC Over the Counter
PX LANCETS ULTRA THIN MISC	1	OTC Over the Counter
PX LANCETS ULTRA THIN 28G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QC ADVANCED LANCING DEVICE MISC	1	OTC Over the Counter
QC LANCETS SUPER THIN 30G MISC	1	OTC Over the Counter
QC LANCETS ULTRA THIN MISC	1	OTC Over the Counter
QC UNILET LANCETS 28G MISC	1	OTC Over the Counter
QC UNILET LANCETS MICRO THIN MISC	1	OTC Over the Counter
RA E-ZJECT LANCETS 28G MISC	1	OTC Over the Counter
RA E-ZJECT LANCETS THIN 26G MISC	1	OTC Over the Counter
RA E-ZJECT LANCETS THIN 28G MISC	1	OTC Over the Counter
RA E-ZJECT LANCETS ULTRA THIN MISC	1	OTC Over the Counter
READYLANCE SAFETY LANCETS MISC	1	OTC Over the Counter
REALITY LANCETS MISC	1	OTC Over the Counter
REALITY TRIGGER LANCETS MISC	1	OTC Over the Counter
RELION LANCET DEVICES 30G MISC	1	OTC Over the Counter
RELION LANCETS MISC	1	OTC Over the Counter
RELION LANCETS MICRO-THIN 33G MISC	1	OTC Over the Counter
RELION LANCETS THIN 26G MISC	1	OTC Over the Counter
RELION LANCETS ULTRA-THIN 30G MISC	1	OTC Over the Counter
RELION LANCING DEVICE KIT	1	OTC Over the Counter
RELION LANCING DEVICE MISC	1	OTC Over the Counter
RELION ULTRA THIN LANCETS 30G MISC	1	OTC Over the Counter
RELION ULTRA THIN PLUS LANCETS MISC	1	OTC Over the Counter
REXALL LANCETS ULTRA THIN 30G MISC	1	OTC Over the Counter
RIGHTEST ALTERNATE SITE ADAPT MISC	1	OTC Over the Counter
RIGHTEST GD500 LANCING DEVICE MISC	1	OTC Over the Counter
RIGHTEST GL300 LANCETS MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFE-T-LANCE MISC	1	OTC Over the Counter
SAFE-T-LANCE PLUS MISC	1	OTC Over the Counter
SAFETY LANCET 21G/PRESSURE ACT MISC	1	OTC Over the Counter
SAFETY LANCET 23G/PRESSURE ACT MISC	1	OTC Over the Counter
SAFETY LANCET 28G/PRESSURE ACT MISC	1	OTC Over the Counter
SAFETY LANCET 30G/PRESSURE ACT MISC	1	OTC Over the Counter
SAFETY LANCETS MISC	1	OTC Over the Counter
SAFETY LANCETS 21G MISC	1	OTC Over the Counter
SAFETY LANCETS 23G MISC	1	OTC Over the Counter
SAFETY LANCETS 28G MISC	1	OTC Over the Counter
SAFETY LET LANCETS MISC	1	OTC Over the Counter
SAFETY SEAL LANCETS MISC	1	OTC Over the Counter
SAPS HEALTH PLUS LANCETS MISC	1	OTC Over the Counter
SAPS HEALTH TWIST TOP LANCETS MISC	1	OTC Over the Counter
SAPS TWIST TOP LANCETS MISC	1	OTC Over the Counter
SAPSCARE TWIST TOP LANCETS MISC	1	OTC Over the Counter
SB LANCETS THIN MISC	1	OTC Over the Counter
SB LANCETS ULTRA THIN MISC	1	OTC Over the Counter
SELECT-LITE DEVICE/LANCETS KIT	1	OTC Over the Counter
SELECT-LITE LANCING DEVICE MISC	1	OTC Over the Counter
SHOPKO AUTOLET LANCING DEVICE MISC	1	OTC Over the Counter
SHOPKO ON-THE-GO LANCETS 30G MISC	1	OTC Over the Counter
SHOPKO UNILET LANCETS 28G MISC	1	OTC Over the Counter
SHOPKO UNILET LANCETS 30G MISC	1	OTC Over the Counter
SIDE BUTTON SAFETY LANCET MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMPLE DIAGNOSTICS LANCING DEV MISC	1	OTC Over the Counter
SINGLE-LET MISC	1	OTC Over the Counter
SM LANCETS 33G MISC	1	OTC Over the Counter
SM TRUEDRAW LANCING DEVICE MISC	1	OTC Over the Counter
SMART DIABETES VANTAGE LANCING MISC	1	OTC Over the Counter
SMART SENSE COLOR LANCETS 33G MISC	1	OTC Over the Counter
SMART SENSE STANDARD LANCETS MISC	1	OTC Over the Counter
SMART SENSE SUPER THIN LANCETS MISC	1	OTC Over the Counter
SMART SENSE THIN LANCETS 26G MISC	1	OTC Over the Counter
SMARTEST LANCETS 28G MISC	1	OTC Over the Counter
SOLUS V2 LANCETS 28G MISC	1	OTC Over the Counter
SOLUS V2 LANCING DEVICE MISC	1	OTC Over the Counter
SOLUS V2 TWIST LANCETS 30G MISC	1	OTC Over the Counter
STERILANCE PA MISC	1	OTC Over the Counter
STERILANCE TL MISC	1	OTC Over the Counter
SUPER THIN LANCETS MISC	1	OTC Over the Counter
SURE COMFORT LANCETS 18G MISC	1	OTC Over the Counter
SURE COMFORT LANCETS 21G MISC	1	OTC Over the Counter
SURE COMFORT LANCETS 23G MISC	1	OTC Over the Counter
SURE COMFORT LANCETS 28G MISC	1	OTC Over the Counter
SURE COMFORT LANCETS 30G MISC	1	OTC Over the Counter
SURE COMFORT LANCING PEN MISC	1	OTC Over the Counter
SURE-LANCE FLAT LANCETS MISC	1	OTC Over the Counter
SURE-LANCE LANCETS 26G MISC	1	OTC Over the Counter
SURE-LANCE THIN LANCETS 28G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE-LANCE ULTRA THIN LANCETS MISC	1	OTC Over the Counter
SURE-PEN MISC	1	OTC Over the Counter
SURE-TOUCH LANCETS UNIVERSAL MISC	1	OTC Over the Counter
SURELITE LANCETS MISC	1	OTC Over the Counter
TECHLITE AST LANCETS MISC	1	OTC Over the Counter
TECHLITE LANCETS MISC	1	OTC Over the Counter
TECHLITE LANCETS 26G MISC	1	OTC Over the Counter
TECHLITE LANCETS 30G MISC	1	OTC Over the Counter
TGT LANCET MICRO THIN 33G MISC	1	OTC Over the Counter
TGT LANCET THIN 26G MISC	1	OTC Over the Counter
TGT LANCET ULTRA THIN 30G MISC	1	OTC Over the Counter
TGT LANCING DEVICE MISC	1	OTC Over the Counter
THINLETS GP LANCETS MISC	1	OTC Over the Counter
TODAYS HEALTH LANCING DEVICE MISC	1	OTC Over the Counter
TODAYS HEALTH THIN LANCETS 28G MISC	1	OTC Over the Counter
TODAYS HEALTH THIN LANCETS 30G MISC	1	OTC Over the Counter
TOPCARE LANCETS MICRO-THIN 33G MISC	1	OTC Over the Counter
TRAVEL LANCETS MISC	1	OTC Over the Counter
TRAVEL LANCETS ADVANCED 28G MISC	1	OTC Over the Counter
TRUE COMFORT SAFETY LANCETS MISC	1	OTC Over the Counter
TRUE COMFORT TWIST TOP LANCETS MISC	1	OTC Over the Counter
TRUEDRAW LANCING DEVICE MISC	1	OTC Over the Counter
TRUEPLUS LANCETS 26G MISC	1	OTC Over the Counter
TRUEPLUS LANCETS 28G MISC	1	OTC Over the Counter
TRUEPLUS LANCETS 30G MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUEPLUS LANCETS 33G MISC	1	OTC Over the Counter
TRUEPLUS SAFETY LANCETS 28G MISC	1	OTC Over the Counter
TWIST TOP LANCETS 30G MISC	1	OTC Over the Counter
ULTI-LANCE AUTOMATIC MISC	1	OTC Over the Counter
ULTILET CLASSIC LANCETS MISC	1	OTC Over the Counter
ULTILET LANCETS MISC	1	OTC Over the Counter
ULTILET SAFETY LANCETS MISC	1	OTC Over the Counter
ULTILET SAFETY LANCETS 23G MISC	1	OTC Over the Counter
ULTRA THIN LANCETS 31G MISC	1	OTC Over the Counter
ULTRA-CARE LANCETS 30G MISC	1	OTC Over the Counter
ULTRA-THIN II AUTO LANCET MISC	1	OTC Over the Counter
ULTRA-THIN II LANCETS MISC	1	OTC Over the Counter
ULTRALANCE MISC	1	OTC Over the Counter
UNILET COMFORTOUCH LANCET MISC	1	OTC Over the Counter
UNILET EXCELITE MISC	1	OTC Over the Counter
UNILET EXCELITE II MISC	1	OTC Over the Counter
UNILET G.P. LANCET MISC	1	OTC Over the Counter
UNILET G.P. SUPERLITE LANCET MISC	1	OTC Over the Counter
UNILET GP 28 ULTRA THIN MISC	1	OTC Over the Counter
UNILET LANCET MISC	1	OTC Over the Counter
UNILET MICRO-THIN 33G MISC	1	OTC Over the Counter
UNILET SUPER-THIN 30G MISC	1	OTC Over the Counter
UNILET SUPERLITE LANCET MISC	1	OTC Over the Counter
UNILET ULTRA-THIN 28G MISC	1	OTC Over the Counter
UNISTIK 1 MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNISTIK 2 MISC	1	OTC Over the Counter
UNISTIK 2 COMFORT MISC	1	OTC Over the Counter
UNISTIK 2 EXTRA MISC	1	OTC Over the Counter
UNISTIK 2 NEONATAL MISC	1	OTC Over the Counter
UNISTIK 2 NORMAL MISC	1	OTC Over the Counter
UNISTIK 2 SUPER MISC	1	OTC Over the Counter
UNISTIK 3 MISC	1	OTC Over the Counter
UNISTIK 3 COMFORT MISC	1	OTC Over the Counter
UNISTIK 3 EXTRA MISC	1	OTC Over the Counter
UNISTIK 3 GENTLE MISC	1	OTC Over the Counter
UNISTIK 3 NEONATAL MISC	1	OTC Over the Counter
UNISTIK 3 NORMAL MISC	1	OTC Over the Counter
UNISTIK CZT COMFORT MISC	1	OTC Over the Counter
UNISTIK CZT NORMAL MISC	1	OTC Over the Counter
UNISTIK NORMAL MISC	1	OTC Over the Counter
UNISTIK PRO SAFETY LANCET MISC	1	OTC Over the Counter
UNISTIK SAFETY LANCETS 28G MISC	1	OTC Over the Counter
UNISTIK SAFETY LANCETS 30G MISC	1	OTC Over the Counter
UNISTIK TOUCH SAFETY LANC 21G MISC	1	OTC Over the Counter
UNISTIK TOUCH SAFETY LANC 23G MISC	1	OTC Over the Counter
UNISTIK TOUCH SAFETY LANC 28G MISC	1	OTC Over the Counter
UNISTIK TOUCH SAFETY LANC 30G MISC	1	OTC Over the Counter
UNIVERSAL 1 LANCETS THIN 26G MISC	1	OTC Over the Counter
UNIVERSAL 1 LANCETS THIN 33G MISC	1	OTC Over the Counter
UNIVERSAL 1 LANCETS ULTRA THIN MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALUE PLUS LANCET STANDARD 21G MISC	1	OTC Over the Counter
VALUE PLUS LANCETS SUPER THIN MISC	1	OTC Over the Counter
VALUE PLUS LANCETS THIN 26G MISC	1	OTC Over the Counter
VALUE PLUS LANCING DEVICE MISC	1	OTC Over the Counter
VALUMARK LANCET SUPER THIN 30G MISC	1	OTC Over the Counter
VALUMARK LANCET ULTRA THIN 28G MISC	1	OTC Over the Counter
VERIFINE SAFE LANCET MINI 21G MISC	1	OTC Over the Counter
VERIFINE SAFE LANCET MINI 23G MISC	1	OTC Over the Counter
VERIFINE SAFE LANCET MINI 28G MISC	1	OTC Over the Counter
VERIFINE SAFE LANCET MINI 30G MISC	1	OTC Over the Counter
VERIFINE UNIVERSAL LANCETS 28G MISC	1	OTC Over the Counter
VERIFINE UNIVERSAL LANCETS 30G MISC	1	OTC Over the Counter
VERIFINE UNIVERSAL LANCETS 33G MISC	1	OTC Over the Counter
VIDA MIA AUTOLET LANCING DEV MISC	1	OTC Over the Counter
VIDA MIA UNILET LANCETS 28G MISC	1	OTC Over the Counter
VIDA MIA UNILET LANCETS 30G MISC	1	OTC Over the Counter
VIVAGUARD LANCETS MISC	1	OTC Over the Counter
VIVAGUARD LANCETS 30G MISC	1	OTC Over the Counter
VIVAGUARD LANCING DEVICE MISC	1	OTC Over the Counter
WALGREENS ADV TRAVEL LANCETS MISC	1	OTC Over the Counter
WALGREENS LANCETS MISC	1	OTC Over the Counter
WALGREENS LANCETS MICRO THIN MISC	1	OTC Over the Counter
WALGREENS LANCETS SUPER THIN MISC	1	OTC Over the Counter
WALGREENS THIN LANCETS MISC	1	OTC Over the Counter
WALGREENS ULTRA THIN LANCETS MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEVRX TWIST TOP LANCETS 30G MISC	1	OTC Over the Counter
INSULIN ADMINISTRATION SUPPLIES		
OMNIPOD 5 G6 INTRO (GEN 5) KIT	1	PA
OMNIPOD 5 G6 PODS (GEN 5) MISC	1	QL 30 / 30 day(s) PA
OMNIPOD 5 G7 INTRO (GEN 5) KIT	1	PA
OMNIPOD 5 G7 PODS (GEN 5) MISC	1	QL 30 / 30 day(s) PA
OMNIPOD 5 PACK MISC	1	QL 30 / 30 day(s) PA
OMNIPOD CLASSIC PDM (GEN 3) KIT	1	PA
OMNIPOD DASH INTRO (GEN 4) KIT	1	PA
OMNIPOD DASH PDM (GEN 4) KIT	1	PA
OMNIPOD DASH PODS (GEN 4) MISC	1	QL 30 / 30 day(s) PA
OMNIPOD GO 20 UNIT/24HR KIT	1	QL 30 / 30 day(s) PA
OMNIPOD GO 30 UNIT/24HR KIT	1	QL 30 / 30 day(s) PA
V-GO 20 20 UNIT/24HR KIT	1	QL 30 / 30 day(s) PA
V-GO 30 30 UNIT/24HR KIT	1	QL 30 / 30 day(s) PA
V-GO 40 40 UNIT/24HR KIT	1	QL 30 / 30 day(s) PA
NEEDLES & SYRINGES		
1ST TIER UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
1ST TIER UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS 32G X 6 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS 33G X 4 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 29G X 12MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
1ST TIER UNIFINE PENTIPS PLUS 33G X 4 MM MISC	1	OTC Over the Counter
ABOUTTIME PEN NEEDLE 30G X 8 MM MISC	1	OTC Over the Counter
ABOUTTIME PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
ABOUTTIME PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
ABOUTTIME PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVOCATE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ADVOCATE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ALLERGIST PACKAGE 26G X 1/2" 1 ML KIT	1	OTC Over the Counter
ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
ALLERGY SYRINGE 27G X 3/8" 1 ML MISC	1	OTC Over the Counter
AQ INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	
AQ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	
AQ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	
AQINJECT PEN NEEDLE 31G X 5 MM MISC	1	
AQINJECT PEN NEEDLE 32G X 4 MM MISC	1	
ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	1	
ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
ASSURE ID PRO PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
ASSURE ID SAFETY PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
ASSURE ID SAFETY PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
ASSURE ID SAFETY PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM MISC	1	OTC Over the Counter
AUM INSULIN SAFETY PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 32G X 5 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 32G X 8 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUM MINI INSULIN PEN NEEDLE 33G X 4 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 33G X 5 MM MISC	1	OTC Over the Counter
AUM MINI INSULIN PEN NEEDLE 33G X 6 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 32G X 5 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 33G X 4 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 33G X 5 MM MISC	1	OTC Over the Counter
AUM PEN NEEDLE 33G X 6 MM MISC	1	OTC Over the Counter
AUM READYGARD DUO PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
AUM SAFETY PEN NEEDLE 31G X 4 MM MISC	1	OTC Over the Counter
AUM SAFETY PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
AURORA PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
AURORA PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
AURORA PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
AURORA UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
AURORA UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
AUTOPEN DEVICE	1	OTC Over the Counter
BD ALLERGIST TRAY 27G X 1/2" 1 ML KIT	1	OTC Over the Counter
BD ALLERGY SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD AUTOSHIELD 29G X 5MM MISC	1	OTC Over the Counter
BD AUTOSHIELD 29G X 8MM MISC	1	OTC Over the Counter
BD AUTOSHIELD DUO 30G X 5 MM MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD ECLIPSE SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE/NEEDLE 22G X 1" 3 ML MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE/NEEDLE 23G X 1" 3 ML MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE/NEEDLE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD ECLIPSE SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 25G X 1" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 26G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 27.5G X 5/8" 2 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE HALF-UNIT 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U-100 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	1	
BD INSULIN SYRINGE U/F 1/2UNIT 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U/F 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD INSULIN SYRINGE U/F 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE U/F 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
BD INTEGRA SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOCK SYRINGE 18G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 18G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1" 1 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1" 10 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1" 5 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 21G X 1" 10 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 21G X 1" 5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD LUER-LOK SYRINGE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 22G X 1" 10 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 22G X 1" 5 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
BD LUER-LOK SYRINGE 26G X 5/8" 3 ML MISC	1	OTC Over the Counter
BD PEN MISC	1	OTC Over the Counter
BD PEN MINI MISC	1	OTC Over the Counter
BD PEN NEEDLE MICRO U/F 32G X 6 MM MISC	1	OTC Over the Counter
BD PEN NEEDLE MINI U/F 31G X 5 MM MISC	1	OTC Over the Counter
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM MISC	1	OTC Over the Counter
BD PEN NEEDLE NANO U/F 32G X 4 MM MISC	1	OTC Over the Counter
BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM MISC	1	OTC Over the Counter
BD PEN NEEDLE SHORT U/F 31G X 8 MM MISC	1	OTC Over the Counter
BD PLASTIPAK SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
BD SAFETY-LOK INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SAFETYGLIDE ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE NEEDLE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE SYRINGE/NEEDLE 25G X 1" 3 ML MISC	1	OTC Over the Counter
BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD SYRINGE SLIP TIP 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD SYRINGE SLIP TIP 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
BD SYRINGE SLIP TIP 26G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
BD SYRINGE/NEEDLE 23G X 1" 3 ML MISC	1	OTC Over the Counter
BD SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
BD SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
BD TB SYRINGE 21G X 1" 1 ML MISC	1	OTC Over the Counter
BD TB SYRINGE 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
BD TB SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
CAREFINE PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
CAREONE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS PLUS 29G X 12MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS PLUS 31G X 6 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREONE UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
CAREONE UNIFINE PENTIPS PLUS 33G X 4 MM MISC	1	OTC Over the Counter
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 1 ML MISC	1	
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 3 ML MISC	1	
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 1 ML MISC	1	
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 3 ML MISC	1	
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 5/8" 3 ML MISC	1	
CAREPOINT SYRINGE LUER LOCK 20G X 1" 3 ML MISC	1	
CAREPOINT SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC	1	
CAREPOINT SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC	1	
CAREPOINT SYRINGE LUER LOCK 23G X 1" 3 ML MISC	1	
CAREPOINT SYRINGE LUER LOCK 25G X 1" 3 ML MISC	1	
CAREPOINT TUBERCLN SYR/LUER SL 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
CARETOUCH HYPODERMIC NEEDLE 26G X 1" MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 29G X 5/16" 1 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
CARETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK 23G X 1" 3 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK SYR/NEEDLE 22G X 1" 3 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK SYR/NEEDLE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK SYR/NEEDLE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 1" 3 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
CARETOUCH PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
CEQUR SIMPLICITY 2U DEVICE	1	
CLEVER CHOICE COMFORT EZ 29G X 12MM MISC	1	OTC Over the Counter
CLEVER CHOICE COMFORT EZ 33G X 4 MM MISC	1	OTC Over the Counter
CLICKFINE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
CLICKFINE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
CLICKFINE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
CLICKFINE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
COMFORT EZ MICRO PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT EZ PEN NEEDLES 32G X 8 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 33G X 5 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 33G X 6 MM MISC	1	OTC Over the Counter
COMFORT EZ PEN NEEDLES 33G X 8 MM MISC	1	OTC Over the Counter
COMFORT EZ PRO PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
COMFORT EZ PRO PEN NEEDLES 31G X 4 MM MISC	1	OTC Over the Counter
COMFORT EZ PRO PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
COMFORT EZ SHORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 31G X 4 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 31G X 5 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 31G X 6 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 31G X 8 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 32G X 4 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 32G X 5 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 32G X 6 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 32G X 8 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 33G X 4 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 33G X 5 MM MISC	1	OTC Over the Counter
COMFORT TOUCH INSULIN PEN NEED 33G X 6 MM MISC	1	OTC Over the Counter
DIALYSIS SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 1 ML MISC	1	OTC Over the Counter
DIALYSIS SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
DIATHRIVE PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
DIATHRIVE PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
DIATHRIVE PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIATHRIVE PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 15/64" 1 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
DROPLET INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
DROPLET MICRON 34G X 3.5 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 29G X 10MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPLET PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
DROPLET PEN NEEDLES 32G X 8 MM MISC	1	OTC Over the Counter
DROPSAFE SAFETY PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
DROPSAFE SAFETY PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.3 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.5 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 1 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC	1	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC	1	
DRUG MART UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
DRUG MART UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
DRUG MART UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
DRUG MART UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
DRUG MART UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
DRUG MART UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 31G X 1/2" 0.3 ML MISC	1	
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 33G X 5 MM MISC	1	OTC Over the Counter
EASY COMFORT PEN NEEDLES 33G X 6 MM MISC	1	OTC Over the Counter
EASY GLIDE PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
EASY TOUCH ALLERGY SYRINGE 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK INSULIN SY 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK INSULIN SY 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK INSULIN SY 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1.5" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1.5" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE 25G X 1" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE FLIPLOCK 25G X 1" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE FLIPLOCK 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE SHEATHLOCK 25G X 1" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH FLURINGE SHEATHLOCK 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH INSULIN SYRINGE 27G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 30G X 6 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
EASY TOUCH PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SAFETY PEN NEEDLES 29G X 8MM MISC	1	OTC Over the Counter
EASY TOUCH SAFETY PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 25G X 1" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 10 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SHEATHLOCK SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB FLIPLOCK SYRINGE 26G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB FLIPLOCK SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB FLIPLOCK SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB SHEATHLOCK SYR 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB SHEATHLOCK SYR 26G X 5/8" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB SHEATHLOCK SYR 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASY TOUCH TB SHEATHLOCK SYR 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
EASYPOINT NEEDLE/SYRINGE 18G X 1" 3 ML MISC	1	
EASYPOINT NEEDLE/SYRINGE 18G X 1-1/2" 3 ML MISC	1	
EASYPOINT NEEDLE/SYRINGE 23G X 1" 3 ML MISC	1	
EASYPOINT NEEDLE/SYRINGE 25G X 1" 3 ML MISC	1	
EASYPOINT NEEDLE/SYRINGE 25G X 5/8" 3 ML MISC	1	
ELITE-THIN INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 28G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 28G X 5/16" 1 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 29G X 5/16" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELITE-THIN INSULIN SYRINGE 29G X 5/16" 1 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
EMBRACE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EQL INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM MISC	1	OTC Over the Counter
EXEL COMFORT POINT PEN NEEDLE 31G X 4 MM MISC	1	OTC Over the Counter
EXEL COMFORT POINT PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
EXEL COMFORT POINT PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
FIFTY50 PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
FIFTY50 PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
FIFTY50 PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
FIFTY50 PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
FREDS PHARMACY UNIFINE PENTIP+ 31G X 5 MM MISC	1	OTC Over the Counter
FREDS PHARMACY UNIFINE PENTIP+ 31G X 8 MM MISC	1	OTC Over the Counter
FREDS PHARMACY UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
FREESTYLE PRECISION INS SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
FREESTYLE PRECISION INS SYR 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
FREESTYLE PRECISION INS SYR 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
FREESTYLE PRECISION INS SYR 31G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL EASE INJECT PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
GLOBAL EASE INJECT PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
GLOBAL EASE INJECT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
GLOBAL EASE INJECT PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
GLOBAL EASY GLIDE INSULIN SYR 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL EASY GLIDE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GLOBAL INSULIN SYRINGES 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
GNP CLICKFINE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
GNP CLICKFINE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGES 28GX1/2" 28G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGES 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGES 30GX5/16" 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GNP INSULIN SYRINGES 31GX5/16" 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GNP ULTICARE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
GNP ULTICARE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
GNP ULTICARE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
GNP ULTICARE PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
GNP ULTIGUARD SAFEPACK NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
GNP ULTIGUARD SAFEPACK NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
GNP ULTIGUARD SAFEPACK NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
GNP ULTIGUARD SAFEPACK NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
GNP ULTRA COM INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
GNP ULTRA COM INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
GOODSENSE PEN NEEDLE PENFINE 31G X 5 MM MISC	1	OTC Over the Counter
GOODSENSE PEN NEEDLE PENFINE 31G X 8 MM MISC	1	OTC Over the Counter
GOODSENSE PEN NEEDLE PENFINE 32G X 4 MM MISC	1	OTC Over the Counter
GOODSENSE PEN NEEDLE PENFINE 32G X 6 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
H-E-B INCONTROL PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
H-E-B INCONTROL PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL UNIFINE PENTIP 31G X 5 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL UNIFINE PENTIP 31G X 6 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL UNIFINE PENTIP 31G X 8 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL UNIFINE PENTIP 32G X 4 MM MISC	1	OTC Over the Counter
H-E-B INCONTROL UNIFINE PENTIP 33G X 4 MM MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
HEALTHWISE MINI PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
HEALTHWISE PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
HEALTHWISE SHORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
HEALTHWISE UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
HEALTHY ACCENTS UNIFINE PENTIP 29G X 12MM MISC	1	OTC Over the Counter
HEALTHY ACCENTS UNIFINE PENTIP 31G X 5 MM MISC	1	OTC Over the Counter
HEALTHY ACCENTS UNIFINE PENTIP 31G X 6 MM MISC	1	OTC Over the Counter
HEALTHY ACCENTS UNIFINE PENTIP 31G X 8 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEALTHY ACCENTS UNIFINE PENTIP 32G X 4 MM MISC	1	OTC Over the Counter
HM ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
HM ULTICARE MINI PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
INCONTROL ULTICARE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	1	
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	1	
INPEN 100-GREY-LILLY-HUMALOG DEVICE	1	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	1	
INPEN 100-PINK-LILLY-HUMALOG DEVICE	1	
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	1	
INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 29G X 1" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE/NEEDLE 27G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE/NEEDLE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
INSULIN SYRINGE/NEEDLE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
INSUPEN PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
INSUPEN PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
INSUPEN PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
INSUPEN PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
INSUPEN PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
INSUPEN SENSITIVE 32G X 6 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSUPEN SENSITIVE 32G X 8 MM MISC	1	OTC Over the Counter
INSUPEN ULTRAFIN 30G X 8 MM MISC	1	OTC Over the Counter
INSUPEN ULTRAFIN 31G X 6 MM MISC	1	OTC Over the Counter
INSUPEN ULTRAFIN 31G X 8 MM MISC	1	OTC Over the Counter
KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
KINRAY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
KINRAY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
KINRAY INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
KMART VALU INSULIN SYRINGE 29G U-100 0.5 ML MISC	1	OTC Over the Counter
KMART VALU INSULIN SYRINGE 29G U-100 1 ML MISC	1	OTC Over the Counter
KMART VALU INSULIN SYRINGE 30G U-100 0.3 ML MISC	1	OTC Over the Counter
KMART VALU INSULIN SYRINGE 30G U-100 0.5 ML MISC	1	OTC Over the Counter
KMART VALU INSULIN SYRINGE 30G U-100 1 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
KROGER INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
KROGER PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
KROGER PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
KROGER PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KROGER PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
KROGER PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
KROGER PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
LEADER INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
LEADER UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
LEADER UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
LEADER UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
LEADER UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
LEADER UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
LITETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
LITETOUCH PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
LITETOUCH PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
LITETOUCH PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
LITETOUCH PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
LITETOUCH PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 22G X 1" 3 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 23G X 1" 3 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 25G X 1" 3 ML MISC	1	OTC Over the Counter
LUER LOCK SAFETY SYRINGES 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML MISC	1	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	1	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	1	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML MISC	1	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC	1	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 1 ML MISC	1	
MAGELLAN SYRINGE-SAFETY NEEDLE 23G X 1" 1 ML MISC	1	
MAGELLAN TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	1	
MAGELLAN TUBERCULIN SYRINGE 28G X 1/2" 1 ML MISC	1	
MARATHON MEDICAL PENTIPS 29G X 12MM MISC	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MARATHON MEDICAL PENTIPS 31G X 5 MM MISC	1	
MARATHON MEDICAL PENTIPS 31G X 8 MM MISC	1	
MARATHON MEDICAL PENTIPS 32G X 4 MM MISC	1	
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM MISC	1	OTC Over the Counter
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 8MM MISC	1	OTC Over the Counter
MAXICOMFORT II PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MEDIC INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
MEDICINE SHOPPE PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
MEDICINE SHOPPE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
MEDICINE SHOPPE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
MEIJER PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
MEIJER PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
MEIJER PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
MICRODOT PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
MICRODOT PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
MICRODOT PEN NEEDLE 33G X 4 MM MISC	1	OTC Over the Counter
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
MM PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
MM PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
MM PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
MM PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
MONOJECT ALLERGIST TRAY 27G X 1/2" 1 ML KIT	1	
MONOJECT ALLERGIST TRAY 28G X 1/2" 0.5 ML KIT	1	
MONOJECT ALLERGIST TRAY 28G X 1/2" 1 ML KIT	1	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	
MONOJECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	
MONOJECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	
MONOJECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
MONOJECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
MONOJECT INSULIN SYRINGE U-100 1 ML MISC	1	
MONOJECT LIFESHIELD SYRINGE 18G X 1" 12 ML MISC	1	
MONOJECT LIFESHIELD SYRINGE 18G X 1" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 18G X 1" 12 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 6 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 21G X 1" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 21G X 1" 6 ML MISC	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 6 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 6 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 23G X 1" 1 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 23G X 1" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 25G X 1" 1 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 25G X 1" 3 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 1 ML MISC	1	
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 3 ML MISC	1	
MONOJECT SYRINGE 18G X 1" 12 ML MISC	1	OTC Over the Counter
MONOJECT SYRINGE 20G X 1" 3 ML MISC	1	
MONOJECT SYRINGE 20G X 1-1/2" 12 ML MISC	1	OTC Over the Counter
MONOJECT SYRINGE 20G X 1-1/2" 3 ML MISC	1	
MONOJECT SYRINGE 20G X 1-1/2" 6 ML MISC	1	
MONOJECT SYRINGE 20G X 3/4" 3 ML MISC	1	
MONOJECT SYRINGE 21G X 1" 3 ML MISC	1	
MONOJECT SYRINGE 21G X 1" 6 ML MISC	1	
MONOJECT SYRINGE 21G X 1-1/2" 3 ML MISC	1	
MONOJECT SYRINGE 21G X 1-1/2" 6 ML MISC	1	
MONOJECT SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
MONOJECT SYRINGE 22G X 1-1/2" 3 ML MISC	1	
MONOJECT SYRINGE 22G X 1-1/2" 6 ML MISC	1	
MONOJECT SYRINGE 23G X 1" 3 ML MISC	1	
MONOJECT SYRINGE 25G X 1" 3 ML MISC	1	
MONOJECT SYRINGE 25G X 1-1/4" 3 ML MISC	1	
MONOJECT SYRINGE 25G X 5/8" 3 ML MISC	1	
MONOJECT SYRINGE 27G X 1-1/4" 3 ML MISC	1	
MONOJECT SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT TB SAFETY SYRINGE 25G X 5/8" 1 ML MISC	1	
MONOJECT TB SAFETY SYRINGE 28G X 1/2" 1 ML MISC	1	
MONOJECT TB SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
MONOJECT TB SYRINGE 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
MONOJECT TB SYRINGE 27G X 1/2" 1 ML MISC	1	
MONOJECT TB SYRINGE 28G X 1/2" 0.5 ML MISC	1	
MONOJECT TB SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
MS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
MS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
MS INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM MISC	1	OTC Over the Counter
NOVOFINE PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
NOVOFINE PLUS PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
NOVOPEN ECHO DEVICE	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOTWIST PEN NEEDLE 32G X 5 MM MISC	1	OTC Over the Counter
OMNITROPE PEN 5 INJ DEVICE MISC	1	OTC Over the Counter
PC UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
PC UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
PC UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
PC UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
PEN NEEDLES 1/2" 29G X 12MM MISC	1	OTC Over the Counter
PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
PEN NEEDLES 3/16" 31G X 5 MM MISC	1	OTC Over the Counter
PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
PEN NEEDLES 5/16" 30G X 8 MM MISC	1	OTC Over the Counter
PEN NEEDLES 5/16" 31G X 8 MM MISC	1	OTC Over the Counter
PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTIPS 32G X 6 MM MISC	1	OTC Over the Counter
PIP PEN NEEDLES 31G X 5MM 31G X 5 MM MISC	1	OTC Over the Counter
PIP PEN NEEDLES 32G X 4MM 32G X 4 MM MISC	1	OTC Over the Counter
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
PRECISION SURE-DOSE SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
PRECISION SURE-DOSE SYRINGE 30G X 3/8" 0.5 ML MISC	1	OTC Over the Counter
PRECISION SURE-DOSE SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
PREFERRED PLUS UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
PREFERRED PLUS UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
PREFERRED PLUS UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
PREFERRED PLUS UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
PREVENT DROPSAFE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
PREVENT SAFETY PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
PREVENT SAFETY PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
PRO COMFORT PEN NEEDLES 31G X 8 MM MISC	1	
PRO COMFORT PEN NEEDLES 32G X 4 MM MISC	1	
PRO COMFORT PEN NEEDLES 32G X 5 MM MISC	1	
PRO COMFORT PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
PURE COMFORT PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
PURE COMFORT PEN NEEDLE 32G X 5 MM MISC	1	OTC Over the Counter
PURE COMFORT PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
PURE COMFORT PEN NEEDLE 32G X 8 MM MISC	1	OTC Over the Counter
PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
PURE COMFORT SAFETY PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
PURE COMFORT SAFETY PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
PX EXTRA SHORT PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
PX INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PX MINI PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
PX PEN NEEDLE 29G X 12MM MISC	1	OTC Over the Counter
PX PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
PX SHORTLENGTH PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
QC PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
QC PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
QC PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
QC UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
RA INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
RA INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
RA INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
RA INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
RA PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
RA PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
RAYA SURE PEN NEEDLE 29G X 12MM MISC	1	OTC Over the Counter
RAYA SURE PEN NEEDLE 31G X 4 MM MISC	1	OTC Over the Counter
RAYA SURE PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
RAYA SURE PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
RAYA SURE PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
REALITY INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
REALITY INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
REALITY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
REALITY INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELION INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
RELION INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
RELION MINI PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
RELION PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
RELION PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
RELION PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
RELION PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
RELION SHORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
SAFESNAP ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFESNAP INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFESNAP INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SAFESNAP INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFESNAP INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
SAFESNAP INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1" 10 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 21G X 1" 10 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFESNAP SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 21G X 1" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1" 10 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
SAFESNAP SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
SAFESNAP TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
SAFESNAP TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFETY INSULIN SYRINGES 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFETY INSULIN SYRINGES 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SAFETY INSULIN SYRINGES 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFETY INSULIN SYRINGES 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFETY INSULIN SYRINGES 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SAFETY PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
SAFETY PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 21G X 1" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFETY SYRINGE/NEEDLE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 22G X 1" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 23G X 1" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGE/NEEDLE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 20G X 1" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SAFETY SYRINGES/NEEDLE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SB INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SB INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SB INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SB INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
SB INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
SECURE SAFE ALLERGY TRAY 27G X 1/2" 1 ML KIT	1	OTC Over the Counter
SECURESAFE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SECURESAFE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SECURESAFE SAFETY PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 20G X 1" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SECURESAFE SYRINGE/NEEDLE 21G X 1" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 22G X 1" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 23G X 1" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 25G X 1" 1 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
SECURESAFE SYRINGE/NEEDLE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SECURESAFE TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
SECURESAFE TUBERCULIN SYRINGE 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
SECURESAFE TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS PLUS 29G X 12MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
SHOPKO UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 1 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
SURE COMFORT PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
SURE-FINE PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE-FINE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
SURE-FINE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
SURE-JECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
SYRINGE 18G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE 20G X 1-1/2" 12 ML MISC	1	OTC Over the Counter
SYRINGE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE 22G X 3/4" 3 ML MISC	1	OTC Over the Counter
SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
SYRINGE 27G X 1-1/4" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 23G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 25G X 1" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
SYRINGE LUER LOCK 25G X 5/8" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE LUER SLIP 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
SYRINGE LUER SLIP 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
SYRINGE LUER SLIP 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
SYRINGE/HYPODERMIC SAFETY 18G X 1" 12 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 15/64" 1 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TECHLITE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 29G X 10MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECHLITE PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
TECHLITE PEN NEEDLES 32G X 8 MM MISC	1	OTC Over the Counter
TECHLITE PLUS PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
TODAYS HEALTH MINI PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TODAYS HEALTH PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TOPCARE CLICKFINE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 33G X 5 MM MISC	1	OTC Over the Counter
TRUE COMFORT PEN NEEDLES 33G X 6 MM MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
TRUE COMFORT PRO PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TRUE COMFORT PRO PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
TRUEPLUS PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
TRUEPLUS PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
TRUEPLUS PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
TRUEPLUS PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
TRUEPLUS PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
TUBERCULIN SYRINGE 26G X 3/8" 1 ML MISC	1	OTC Over the Counter
TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	1	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	1	
ULTICARE INSULIN SYR 1/2 UNIT 31G X 1/4" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 1/4" 1 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTICARE MICRO PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
ULTICARE MICRO PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ULTICARE MICRO PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
ULTICARE MINI PEN NEEDLES 30G X 5 MM MISC	1	OTC Over the Counter
ULTICARE MINI PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
ULTICARE MINI PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
ULTICARE PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
ULTICARE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ULTICARE SAFETY SYRINGE 22G X 1-1/2" 1.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE SHORT PEN NEEDLES 30G X 8 MM MISC	1	OTC Over the Counter
ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ULTICARE SYRINGE 22G X 1-1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE SYRINGE 22G X 1-1/2" 1.5 ML MISC	1	OTC Over the Counter
ULTICARE SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
ULTICARE TUBERCULIN SAFETY SYR 25G X 1" 1 ML MISC	1	OTC Over the Counter
ULTICARE TUBERCULIN SAFETY SYR 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
ULTICARE TUBERCULIN SAFETY SYR 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTICARE TUBERCULIN SAFETY SYR 27G X 5/8" 1 ML MISC	1	OTC Over the Counter
ULTICARE TUBERCULIN SAFETY SYR 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 29G X 12.7MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTILET INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 1/4" 1 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTILET PEN NEEDLE 29G X 12.7MM MISC	1	OTC Over the Counter
ULTILET PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
ULTILET PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
ULTILET PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
ULTRA COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA FLO INSULIN PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ULTRA FLO INSULIN PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ULTRA FLO INSULIN PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
ULTRA FLO INSULIN PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYR 1/2 UNIT 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA THIN PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM MISC	1	OTC Over the Counter
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ULTRACARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 32G X 5 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 32G X 6 MM MISC	1	OTC Over the Counter
ULTRACARE PEN NEEDLES 33G X 4 MM MISC	1	OTC Over the Counter
UNIFINE PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 30G X 5 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 31G X 5 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 32G X 6 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS 33G X 4 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 29G X 12MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 30G X 5 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 31G X 6 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNIFINE PENTIPS PLUS 33G X 4 MM MISC	1	OTC Over the Counter
UNIFINE PROTECT PEN NEEDLE 30G X 5 MM MISC	1	OTC Over the Counter
UNIFINE PROTECT PEN NEEDLE 30G X 8 MM MISC	1	OTC Over the Counter
UNIFINE PROTECT PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM MISC	1	OTC Over the Counter
UNIFINE SAFECONTROL PEN NEEDLE 30G X 8 MM MISC	1	OTC Over the Counter
UNIFINE SAFECONTROL PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
UNIFINE ULTRA PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
UNIFINE ULTRA PEN NEEDLE 31G X 6 MM MISC	1	OTC Over the Counter
UNIFINE ULTRA PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
UNIFINE ULTRA PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
VALUMARK PEN NEEDLES 29G X 12MM MISC	1	OTC Over the Counter
VALUMARK PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
VALUMARK PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
VANISHPOINT ALLERGY TRAY 27G X 1/2" 1 ML KIT	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 20G X 1" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SAFETY SYRINGE 20G X 1" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 10 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SAFETY SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 20G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 20G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 21G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 21G X 1-1/2" 10 ML MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SYRINGE 21G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 21G X 1-1/2" 5 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 22G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 22G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 23G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 23G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 25G X 1" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 25G X 1" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 25G X 1-1/2" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT SYRINGE 25G X 5/8" 3 ML MISC	1	OTC Over the Counter
VANISHPOINT TUBERCULIN SYRINGE 25G X 1" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC	1	OTC Over the Counter
VANISHPOINT TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	1	OTC Over the Counter
VERIFINE INSULIN PEN NEEDLE 29G X 12MM MISC	1	OTC Over the Counter
VERIFINE INSULIN PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
VERIFINE INSULIN PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter
VERIFINE INSULIN PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
VERIFINE INSULIN PEN NEEDLE 32G X 6 MM MISC	1	OTC Over the Counter
VERIFINE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
VERIFINE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	1	OTC Over the Counter
VERIFINE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	1	OTC Over the Counter
VERIFINE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
VERIFINE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	1	OTC Over the Counter
VERIFINE PLUS PEN NEEDLE 31G X 5 MM MISC	1	OTC Over the Counter
VERIFINE PLUS PEN NEEDLE 31G X 8 MM MISC	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERIFINE PLUS PEN NEEDLE 32G X 4 MM MISC	1	OTC Over the Counter
VIDA MIA UNIFINE PENTIPS 29G X 12MM MISC	1	OTC Over the Counter
VIDA MIA UNIFINE PENTIPS 31G X 6 MM MISC	1	OTC Over the Counter
VIDA MIA UNIFINE PENTIPS 31G X 8 MM MISC	1	OTC Over the Counter
VIDA MIA UNIFINE PENTIPS 32G X 4 MM MISC	1	OTC Over the Counter
VP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	1	OTC Over the Counter
WEGMANS UNIFINE PENTIPS PLUS 31G X 5 MM MISC	1	OTC Over the Counter
WEGMANS UNIFINE PENTIPS PLUS 31G X 6 MM MISC	1	OTC Over the Counter
WEGMANS UNIFINE PENTIPS PLUS 31G X 8 MM MISC	1	OTC Over the Counter
WEGMANS UNIFINE PENTIPS PLUS 32G X 4 MM MISC	1	OTC Over the Counter
ZEVRX INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	1	OTC Over the Counter
ZEVRX INSULIN SYRINGE 30G X 1/2" 1 ML MISC	1	OTC Over the Counter
ZEVRX INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	1	OTC Over the Counter
ZEVRX INSULIN SYRINGE 30G X 5/16" 1 ML MISC	1	OTC Over the Counter
ZEVRX PEN NEEDLES 31G X 5 MM MISC	1	OTC Over the Counter
ZEVRX PEN NEEDLES 31G X 6 MM MISC	1	OTC Over the Counter
ZEVRX PEN NEEDLES 31G X 8 MM MISC	1	OTC Over the Counter
ZEVRX PEN NEEDLES 32G X 4 MM MISC	1	OTC Over the Counter
SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES		
AEROCHAMBER HOLDING CHAMBER DEVICE	1	
AEROCHAMBER MINI CHAMBER DEVICE	1	
AEROCHAMBER MV MISC	1	
AEROCHAMBER PLS FLOVU MTHPIECE DEVICE	1	
AEROCHAMBER PLUS FLO-VU MISC	1	
AEROCHAMBER PLUS FLO-VU INTERM DEVICE	1	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	1	
AEROCHAMBER PLUS FLO-VU LARGE MISC	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	1	
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	1	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	1	
AEROCHAMBER PLUS FLO-VU SMALL MISC	1	
AEROCHAMBER PLUS FLO-VU W/MASK MISC	1	
AEROCHAMBER PLUS FLOW VU MISC	1	
AEROCHAMBER W/FLOWSIGNAL MISC	1	
AEROCHAMBER Z-STAT PLUS MISC	1	
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	1	
AEROCHAMBER Z-STAT PLUS/LARGE MISC	1	
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	1	
AEROCHAMBER Z-STAT PLUS/SMALL MISC	1	
AEROVENT PLUS DEVICE	1	
BREATHE COMFORT CHAMBER/ADULT DEVICE	1	OTC Over the Counter
BREATHE COMFORT CHAMBER/CHILD DEVICE	1	OTC Over the Counter
BREATHE EASE LARGE DEVICE	1	
BREATHE EASE MEDIUM DEVICE	1	
BREATHE EASE SMALL DEVICE	1	
BREATHERITE MISC	1	
BREATHERITE COLL SPACER CHILD MISC	1	
BREATHERITE COLL SPACER INFANT MISC	1	
BREATHERITE RIGID SPACER/MASK MISC	1	
BREATHERITE SPACER NEONATE MISC	1	
BREATHERITE SPACER SMALL CHILD MISC	1	
BREATHERITE VALVED MDI CHAMBER DEVICE	1	
BREATHERITE/LARGE MASK MISC	1	
CLEVER CHOICE HOLDING CHAMBER DEVICE	1	OTC Over the Counter
COMPACT SPACE CHAMBER DEVICE	1	
COMPACT SPACE CHAMBER/LG MASK DEVICE	1	
COMPACT SPACE CHAMBER/MED MASK DEVICE	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPACT SPACE CHAMBER/SM MASK DEVICE	1	
EASIVENT MISC	1	
EASIVENT MASK LARGE MISC	1	
EASIVENT MASK MEDIUM MISC	1	
EASIVENT MASK SMALL MISC	1	
EQ SPACE CHAMBER ANTI-STATIC DEVICE	1	
EQ SPACE CHAMBER ANTI-STATIC L DEVICE	1	
EQ SPACE CHAMBER ANTI-STATIC M DEVICE	1	
EQ SPACE CHAMBER ANTI-STATIC S DEVICE	1	
FLEXICHAMBER DEVICE	1	
FLEXICHAMBER ADULT MASK/SMALL MISC	1	
FLEXICHAMBER CHILD MASK/LARGE MISC	1	
FLEXICHAMBER CHILD MASK/SMALL MISC	1	
INSPIRACHAMBER/LARGE DEVICE	1	
INSPIRACHAMBER/MEDIUM DEVICE	1	
INSPIRACHAMBER/MOUTHPIECE DEVICE	1	
INSPIRACHAMBER/SMALL DEVICE	1	
INSPIREASE MISC	1	
INSPIREASE RESERVOIR BAGS MISC	1	
LITEAIRE DEVICE	1	
MASK VORTEX MISC	1	OTC Over the Counter
MASK VORTEX/CHILD/FROG MISC	1	OTC Over the Counter
MASK VORTEX/TODDLER/LADYBUG MISC	1	OTC Over the Counter
MICROCHAMBER DEVICE	1	
MICROCHAMBER MISC	1	
MICROSPACER MISC	1	
OPTICHAMBER ADVANTAGE-LG MASK MISC	1	
OPTICHAMBER ADVANTAGE-MED MASK MISC	1	
OPTICHAMBER ADVANTAGE-SM MASK MISC	1	
OPTICHAMBER DIAMOND DEVICE	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPTICHAMBER DIAMOND MISC	1	
OPTICHAMBER DIAMOND-LG MASK DEVICE	1	
OPTICHAMBER DIAMOND-MD MASK MISC	1	
OPTICHAMBER DIAMOND-SM MASK MISC	1	
OPTICHAMBER FACE MASK-LARGE MISC	1	OTC Over the Counter
OPTICHAMBER FACE MASK-MEDIUM MISC	1	OTC Over the Counter
OPTICHAMBER FACE MASK-SMALL MISC	1	OTC Over the Counter
OPTIHALER DEVICE	1	
OPTIHALER MISC	1	
PANDA MASK LARGE MISC	1	OTC Over the Counter
PANDA MASK MEDIUM MISC	1	OTC Over the Counter
PANDA MASK SMALL MISC	1	OTC Over the Counter
PARI VORTEX ADULT MASK MISC	1	OTC Over the Counter
PEDIATRIC PANDA MASK MISC	1	OTC Over the Counter
POCKET CHAMBER DEVICE	1	
POCKET SPACER DEVICE	1	
PRIMEAIRE HOLDING CHAMBER DEVICE	1	
PRO COMFORT SPACER ADULT MISC	1	OTC Over the Counter
PRO COMFORT SPACER CHILD MISC	1	OTC Over the Counter
PRO COMFORT SPACER INFANT DEVICE	1	OTC Over the Counter
PROCARE SPACER/ADULT MASK DEVICE	1	OTC Over the Counter
PROCARE SPACER/CHILD MASK DEVICE	1	OTC Over the Counter
PROCHAMBER VHC DEVICE	1	
PURE COMFORT SPACER CHAMBER DEVICE	1	OTC Over the Counter
RITEFLO DEVICE	1	
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	1	
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	1	
VORTEX HOLDING CHAMBER/MASK DEVICE	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VORTEX VALVED HOLDING CHAMBER DEVICE	1	
WATCHHALER DEVICE	1	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)		
NURTEC 75 MG TAB DISP	3	QL 16 / 30 days PA
UBRELVY 100 MG TAB	3	QL 16 / 30 days PA
UBRELVY 50 MG TAB	3	QL 16 / 30 days PA
CGRP RECEPTOR ANTAGONISTS - MONOCOLONAL ANTIBODIES		
AIMOVIG 140 MG/ML SOLN A-INJ	1	QL 1 / 28 days PA
AIMOVIG 70 MG/ML SOLN A-INJ	1	QL 1 / 28 days PA
EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR	1	PA AL1 At least 18 yrs old QLC 9 / 180 day(s)
EMGALITY 120 MG/ML SOLN A-INJ	1	QL 1 / 28 day(s) PA AL1 At least 18 yrs old
EMGALITY 120 MG/ML SOLN PRSYR	1	QL 1 / 28 day(s) PA AL1 At least 18 yrs old
SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
naratriptan hcl 1 mg tab	1	QLC 18 / 30 day(s)
naratriptan hcl 2.5 mg tab	1	QLC 18 / 30 day(s)
rizatriptan benzoate 10 mg tab	1	QLC 18 / 30 day(s)
rizatriptan benzoate 5 mg tab	1	QLC 18 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sumatriptan 20 mg/act solution	1	QLC 12 / 30 day(s)
sumatriptan 5 mg/act solution	1	QLC 12 / 30 day(s)
sumatriptan succinate 100 mg tab	1	QLC 18 / 30 day(s)
sumatriptan succinate 25 mg tab	1	QLC 18 / 30 day(s)
sumatriptan succinate 4 mg/0.5ml soln a-inj	1	QL 6 / 30 day(s)
sumatriptan succinate 50 mg tab	1	QLC 18 / 30 day(s)
sumatriptan succinate 6 mg/0.5ml soln a-inj	1	QL 6 / 30 day(s)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SOLN PRSYR	1	QL 6 / 30 day(s)
sumatriptan succinate 6 mg/0.5ml solution	1	QL 5 / 30 day(s)
SUMATRIPTAN SUCCINATE REFILL 4 MG/0.5ML SOLN CART	1	QL 6 / 30 day(s)
sumatriptan succinate refill 4 mg/0.5ml soln cart	1	QL 6 / 30 day(s)
SUMATRIPTAN SUCCINATE REFILL 6 MG/0.5ML SOLN CART	1	QL 6 / 30 day(s)
sumatriptan succinate refill 6 mg/0.5ml soln cart	1	QL 6 / 30 day(s)
zolmitriptan 2.5 mg tab	1	QLC 12 / 30 day(s)
zolmitriptan 5 mg tab	1	QLC 12 / 30 day(s)
SELECTIVE SEROTONIN AGONISTS 5-HT(1F)		
REYVOW 100 MG TAB	2	QL 8 / 30 day(s) PA AL1 At least 18 yrs old
REYVOW 50 MG TAB	2	QL 8 / 30 day(s) PA AL1 At least 18 yrs old
MINERALS & ELECTROLYTES		
CALCIUM		
calcium 600 1500 (600 ca) mg tab	1	OTC Over the Counter
calcium carbonate 1500 (600 ca) mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
calcium high potency 1500 (600 ca) mg tab	1	OTC Over the Counter
gnp calcium 1500 (600 ca) mg tab	1	OTC Over the Counter
hm calcium 1500 (600 ca) mg tab	1	OTC Over the Counter
pure calcium carbonate 1500 (600 ca) mg tab	1	OTC Over the Counter
qc calcium fast dissolution 1500 (600 ca) mg tab	1	OTC Over the Counter
ra calcium 600 1500 (600 ca) mg tab	1	OTC Over the Counter
super calcium 1500 (600 ca) mg tab	1	OTC Over the Counter
CALCIUM COMBINATIONS		
calcium + vitamin d3 600-10 mg-mcg tab	1	OTC Over the Counter
calcium 600+d 600-10 mg-mcg tab	1	OTC Over the Counter
calcium 600+d high potency 600-10 mg-mcg tab	1	OTC Over the Counter
calcium 600+d3 600-10 mg-mcg tab	1	OTC Over the Counter
calcium 600/vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
calcium carb-cholecalciferol 600-10 mg-mcg tab	1	OTC Over the Counter
calcium carb-cholecalciferol 600-5 mg-mcg tab	1	OTC Over the Counter
eql calcium/vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
hm calcium-vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
kp calcium 600+d 600-10 mg-mcg tab	1	OTC Over the Counter
px calcium&d 600-10 mg-mcg tab	1	OTC Over the Counter
ra calcium 600/vitamin d-3 600-10 mg-mcg tab	1	OTC Over the Counter
ra calcium plus vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
ra calcium plus vitamin d3 600-10 mg-mcg tab	1	OTC Over the Counter
sm calcium 600/vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
sm calcium-vitamin d 600-10 mg-mcg tab	1	OTC Over the Counter
super calcium 600 + d 400 600-10 mg-mcg tab	1	OTC Over the Counter
super calcium 600 + d3 600-10 mg-mcg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ultra calcium + vitamin d3 600-10 mg-mcg tab	1	OTC Over the Counter
FLUORIDE		
fluoritab 0.275 (0.125 f) mg/drop solution	1	ACA Affordable Care Act
nafrinse 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act
NAFRINSE DROPS 0.275 (0.125 F) MG/DROP SOLUTION	1	ACA Affordable Care Act
sodium fluoride 0.55 (0.25 f) mg chew tab	1	ACA Affordable Care Act
sodium fluoride 1.1 (0.5 f) mg chew tab	1	ACA Affordable Care Act
sodium fluoride 1.1 (0.5 f) mg/ml solution	1	ACA Affordable Care Act
sodium fluoride 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act
PHOSPHATE		
K-PHOS 500 MG TAB	1	
phospha 250 neutral 155-852-130 mg tab	1	
phospho-trin 250 neutral 155-852-130 mg tab	1	
phosphorous 155-852-130 mg tab	1	
virt-phos 250 neutral 155-852-130 mg tab	1	
wes-phos 250 neutral 155-852-130 mg tab	1	
POTASSIUM		
klor-con 10 10 meq tab er	1	
klor-con 8 meq tab er	1	
klor-con m10 10 meq tab er	1	
klor-con m15 15 meq tab er	1	
klor-con m20 20 meq tab er	1	
potassium chloride 10 % solution	1	
potassium chloride 20 meq/15ml (10%) solution	1	
potassium chloride 40 meq/15ml (20%) solution	1	
potassium chloride crys er 10 meq tab er	1	
potassium chloride crys er 15 meq tab er	1	
potassium chloride crys er 20 meq tab er	1	
potassium chloride er 10 meq tab er	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
potassium chloride er 15 meq tab er	1	
potassium chloride er 20 meq tab er	1	
POTASSIUM CHLORIDE ER 8 MEQ TAB ER	1	
potassium chloride er 8 meq tab er	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
ANTILEPROTICS		
THALOMID 100 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
THALOMID 150 MG CAP	3	QL 60 / 30 day(s) PA S Specialty Drug
THALOMID 200 MG CAP	3	QL 60 / 30 day(s) PA S Specialty Drug
THALOMID 50 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS		
BENLYSTA 200 MG/ML SOLN A-INJ	3	QL 4 / 28 day(s) PA S Specialty Drug
BENLYSTA 200 MG/ML SOLN PRSYR	3	QL 4 / 28 day(s) PA S Specialty Drug
CYCLOSPORINE ANALOGS		
cyclosporine 100 mg cap	1	
cyclosporine 25 mg cap	1	
cyclosporine modified 100 mg cap	1	
cyclosporine modified 100 mg/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cyclosporine modified 25 mg cap	1	
cyclosporine modified 50 mg cap	1	
gengraf 100 mg cap	1	
gengraf 100 mg/ml solution	1	
gengraf 25 mg cap	1	
FARNESYLTRANSFERASE INHIBITORS		
ZOKINVY 50 MG CAP	1	QL 120 / 30 day(s) PA S Specialty Drug
ZOKINVY 75 MG CAP	1	QL 120 / 30 day(s) PA S Specialty Drug
IMMUNOMODULATORS FOR MYELODYSPLASTIC SYNDROMES		
lenalidomide 10 mg cap	1	QL 30 / 30 day(s) PA S Specialty Drug
lenalidomide 15 mg cap	1	QL 21 / 28 day(s) PA S Specialty Drug
lenalidomide 2.5 mg cap	1	QL 30 / 30 day(s) PA S Specialty Drug
lenalidomide 20 mg cap	1	QL 21 / 28 day(s) PA S Specialty Drug
lenalidomide 25 mg cap	1	QL 21 / 28 day(s) PA S Specialty Drug
lenalidomide 5 mg cap	1	QL 30 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
mycophenolate mofetil 200 mg/ml recon susp	1	
mycophenolate mofetil 250 mg cap	1	
mycophenolate mofetil 500 mg tab	1	
mycophenolate sodium 180 mg tab dr	2	
mycophenolate sodium 360 mg tab dr	2	
mycophenolic acid 180 mg tab dr	2	
mycophenolic acid 360 mg tab dr	2	
MACROLIDE IMMUNOSUPPRESSANTS		
everolimus 0.25 mg tab	1	
everolimus 0.5 mg tab	1	
everolimus 0.75 mg tab	1	
everolimus 1 mg tab	1	
sirolimus 0.5 mg tab	2	
sirolimus 1 mg tab	2	
sirolimus 1 mg/ml solution	2	
sirolimus 2 mg tab	2	
tacrolimus 0.5 mg cap	1	
tacrolimus 1 mg cap	1	
tacrolimus 5 mg cap	2	
POTASSIUM REMOVING AGENTS		
kionex 15 gm/60ml suspension	1	
LOKELMA 10 GM PACKET	2	QL 30 / 30 day(s)
LOKELMA 5 GM PACKET	2	QL 30 / 30 day(s)
sodium polystyrene sulfonate powder	1	
sodium polystyrene sulfonate 15 gm/60ml suspension	1	
PURINE ANALOGS		
azasan 100 mg tab	1	
azasan 75 mg tab	2	
azathioprine 100 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
azathioprine 50 mg tab	1	
azathioprine 75 mg tab	2	
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
lidocaine viscous hcl 2 % solution	1	
ANTI-INFECTIVES - THROAT		
nystatin 100000 unit/ml suspension	1	
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate 0.12 % solution	1	
paroex 0.12 % solution	1	
periogard 0.12 % solution	1	
DENTAL PRODUCTS - COMBINATIONS		
sodium fluoride 5000 enamel 1.1-5 % gel	1	ACA Affordable Care Act
sodium fluoride 5000 sensitive 1.1-5 % gel	1	ACA Affordable Care Act
FLUORIDE DENTAL PRODUCTS		
cavarest 1.1 % gel	1	ACA Affordable Care Act
clinpro 5000 1.1 % paste	1	ACA Affordable Care Act
denta 5000 plus 1.1 % cream	1	ACA Affordable Care Act
dentagel 1.1 % gel	1	ACA Affordable Care Act
easygel 0.4 % gel	1	ACA Affordable Care Act OTC Over the Counter
fluoridex 1.1 % paste	1	ACA Affordable Care Act
fluoridex daily renewal 0.63 % conc	1	ACA Affordable Care Act
fluoridex enhanced whitening 1.1 % paste	1	ACA Affordable Care Act
fluorimax 5000 1.1 % paste	1	ACA Affordable Care Act
just for kids 0.4 % gel	1	ACA Affordable Care Act OTC Over the Counter
just right 5000 1.1 % gel	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
just right 5000 1.1 % paste	1	ACA Affordable Care Act
periomed 0.63 % conc	1	ACA Affordable Care Act OTC Over the Counter
sf 1.1 % gel	1	ACA Affordable Care Act
sf 5000 plus 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 0.2 % solution	1	ACA Affordable Care Act
sodium fluoride 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 1.1 % gel	1	ACA Affordable Care Act
sodium fluoride 5000 plus 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 5000 ppm 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 5000 ppm 1.1 % gel	1	ACA Affordable Care Act
sodium fluoride 5000 ppm 1.1 % paste	1	ACA Affordable Care Act
SALIVA STIMULANTS		
cevimeline hcl 30 mg cap	1	
pilocarpine hcl 5 mg tab	1	
pilocarpine hcl 7.5 mg tab	1	
STEROIDS - MOUTH/THROAT/DENTAL		
kourzeq 0.1 % paste	1	
oralone 0.1 % paste	1	
triamcinolone acetonide 0.1 % paste	1	
MULTIVITAMINS		
B-COMPLEX W/ C & FOLIC ACID		
b complex-c-folic acid tab	1	OTC Over the Counter
b-complex balanced tab	1	OTC Over the Counter
b-complex-c (w/folic acid) tab	1	OTC Over the Counter
b-complex/vitamin c tab	1	OTC Over the Counter
dialyvite tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dialyvite 800 0.8 mg tab	1	OTC Over the Counter
eql super b complex/vitamin c tab	1	OTC Over the Counter
folbee plus tab	1	
folika-bc 1 mg tab	1	OTC Over the Counter
full spectrum b/vitamin c 0.8 mg tab	1	OTC Over the Counter
kp b complex-c tab	1	OTC Over the Counter
mynephrocaps 1 mg cap	1	
nephro vitamins 0.8 mg tab	1	OTC Over the Counter
nephro-vite 0.8 mg tab	1	OTC Over the Counter
NEPHRO-VITE RX 1 MG TAB	1	
px b complex/vitamin c tab	1	OTC Over the Counter
rena-vite tab	1	OTC Over the Counter
rena-vite rx 1 mg tab	1	OTC Over the Counter
renal multivitamin formula tab	1	OTC Over the Counter
renal vitamin 0.8 mg tab	1	OTC Over the Counter
renal-vite 0.8 mg tab	1	OTC Over the Counter
reno caps 1 mg cap	1	
sm b super vitamin complex tab	1	OTC Over the Counter
stress formula (folic acid) tab	1	OTC Over the Counter
super b complex/fa/vit c tab	1	OTC Over the Counter
super b-complex/vit c/fa tab	1	OTC Over the Counter
triphrocaps 1 mg cap	1	
vita-bee/c tab	1	OTC Over the Counter
MULTIPLE VITAMINS W/ IRON		
daily multiple vitamins/iron tab	1	OTC Over the Counter
daily vitamin formula+iron tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
daily vite multivitamin/iron tab	1	OTC Over the Counter
daily-vitamin/iron tab	1	OTC Over the Counter
daily-vite/iron/beta-carotene tab	1	OTC Over the Counter
hm one daily/iron tab	1	OTC Over the Counter
multi-day plus iron tab	1	OTC Over the Counter
multi-vitamin/iron tab	1	OTC Over the Counter
multiple vitamins/iron tab	1	OTC Over the Counter
multivitamin plus iron adult tab	1	OTC Over the Counter
nat-rul daily-vite+iron tab	1	OTC Over the Counter
once daily/iron tab	1	OTC Over the Counter
one daily multivitamin/iron tab	1	OTC Over the Counter
one-daily multi-vitamin/iron tab	1	OTC Over the Counter
one-daily/iron tab	1	OTC Over the Counter
qc daily multivitamins/iron tab	1	OTC Over the Counter
sm multiple vitamins/iron tab	1	OTC Over the Counter
stress b complex/iron tab	1	OTC Over the Counter
stress formula/iron tab	1	OTC Over the Counter
tab-a-vite/iron tab	1	OTC Over the Counter
MULTIPLE VITAMINS W/ MINERALS		
a thru z select chew tab	1	OTC Over the Counter
ADEK GUMMIES PLUS ZN CHEW TAB	1	OTC Over the Counter
ADULT ONE DAILY GUMMIES CHEW TAB	1	OTC Over the Counter
advanced multi ea chew tab	1	OTC Over the Counter
AIRBORNE CHEW TAB	1	OTC Over the Counter
airborne chew tab	1	OTC Over the Counter
airborne gummies chew tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AIRBORNE KIDS CHEW TAB	1	OTC Over the Counter
airborne kids chew tab	1	OTC Over the Counter
AIRBORNE+GOOD REST CHEW TAB	1	OTC Over the Counter
AIRBORNE+PROBIOTIC CHEW TAB	1	OTC Over the Counter
ALIVE HAIR, SKIN & NAILS CHEW TAB	1	OTC Over the Counter
ALIVE MENS 50+ MULTI GUMMY CHEW TAB	1	OTC Over the Counter
ALIVE MENS GUMMY MULTIVITAMINS CHEW TAB	1	OTC Over the Counter
ALIVE MULTI-VITAMIN CHEW TAB	1	OTC Over the Counter
ALIVE WOMENS 50+ CHEW TAB	1	OTC Over the Counter
ALIVE WOMENS 50+ GUMMY CHEW TAB	1	OTC Over the Counter
ALIVE WOMENS GUMMY CHEW TAB	1	OTC Over the Counter
BARIATRIC FUSION CHEW TAB	1	OTC Over the Counter
CELEBRATE MULTI-COMPLETE 18 CHEW TAB	1	OTC Over the Counter
CELEBRATE MULTI-COMPLETE 36 CHEW TAB	1	OTC Over the Counter
CELEBRATE MULTI-COMPLETE 45 CHEW TAB	1	OTC Over the Counter
CELEBRATE MULTI-COMPLETE 60 CHEW TAB	1	OTC Over the Counter
CENTRUM CHEW TAB	1	OTC Over the Counter
CENTRUM TAB	1	OTC Over the Counter
CENTRUM ADULT 50+ MULTIGUMMIES CHEW TAB	1	OTC Over the Counter
CENTRUM ADULTS TAB	1	OTC Over the Counter
CENTRUM ADULTS MULTIGUMMIES CHEW TAB	1	OTC Over the Counter
CENTRUM FLAVOR BURST CHEW TAB	1	OTC Over the Counter
CENTRUM FLAVOR BURST ADULT CHEW TAB	1	OTC Over the Counter
CENTRUM FRESH/FRUITY 50+ CHEW TAB	1	OTC Over the Counter
CENTRUM FRESH/FRUITY ADULT CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CENTRUM MEN TAB	1	OTC Over the Counter
CENTRUM MULTI + OMEGA 3 CHEW TAB	1	OTC Over the Counter
CENTRUM MULTIGUMMIES CHEW TAB	1	OTC Over the Counter
CENTRUM SILVER CHEW TAB	1	OTC Over the Counter
CENTRUM SILVER TAB	1	OTC Over the Counter
CENTRUM SILVER 50+MEN TAB	1	OTC Over the Counter
CENTRUM SILVER 50+WOMEN TAB	1	OTC Over the Counter
CENTRUM SILVER ADULT 50+ TAB	1	OTC Over the Counter
CENTRUM VITAMINTS CHEW TAB	1	OTC Over the Counter
CENTRUM WOMEN TAB	1	OTC Over the Counter
CHOICEFUL MULTIVITAMIN CHEW TAB	1	OTC Over the Counter
CORVITA TAB	1	
CULTURELLE PROBIOTICS + MULTIV CHEW TAB	1	OTC Over the Counter
cvs airshield chew tab	1	OTC Over the Counter
CVS AIRSHIELD IMMUNITY SUPPORT CHEW TAB	1	OTC Over the Counter
cvs daily gummies chew tab	1	OTC Over the Counter
cvs daily gummies adult chew tab	1	OTC Over the Counter
cvs mens daily gummies chew tab	1	OTC Over the Counter
CVS SPECTRAVITE ADULT 50+ CHEW TAB	1	OTC Over the Counter
CVS SPECTRAVITE WOMEN CHEW TAB	1	OTC Over the Counter
cvs womens daily gummies chew tab	1	OTC Over the Counter
DEKAS BARIATRIC CHEW TAB	1	OTC Over the Counter
DEKAS PLUS CHEW TAB	1	OTC Over the Counter
DIALYVITE SUPREME D TAB	1	
EMERGEN-C IMMUNE PLUS/VIT D CHEW TAB	1	OTC Over the Counter
EMERGEN-C VITAMIN C CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EQ MULTIVITAMINS ADULT GUMMY CHEW TAB	1	OTC Over the Counter
EQL ONE DAILY ADULT GUMMIES CHEW TAB	1	OTC Over the Counter
FOSFREE TAB	1	OTC Over the Counter
hm multivitamin adult gummy chew tab	1	OTC Over the Counter
IMMUNE SUPPORT CHEW TAB	1	OTC Over the Counter
MENS MULTIVITAMIN CHEW TAB	1	OTC Over the Counter
multi + omega-3 adult gummies chew tab	1	OTC Over the Counter
multi adult gummies chew tab	1	OTC Over the Counter
multi-vitamin gummies chew tab	1	OTC Over the Counter
MULTIVITAMIN ADULT CHEW TAB	1	OTC Over the Counter
MULTIVITAMIN ADULT EXTRA C CHEW TAB	1	OTC Over the Counter
multivitamin gummies adult chew tab	1	OTC Over the Counter
multivitamin gummies mens chew tab	1	OTC Over the Counter
multivitamin gummies womens chew tab	1	OTC Over the Counter
multivitamin/extra vitamin d3 chew tab	1	OTC Over the Counter
MVW HI-D ADEK GUMMIES CHEW TAB	1	OTC Over the Counter
ocuvite eye heatlh gummies chew tab	1	OTC Over the Counter
ONE A DAY IMMUNITY DEFENSE CHEW TAB	1	OTC Over the Counter
ONE A DAY MENS VITACRAVES CHEW TAB	1	OTC Over the Counter
ONE A DAY WOMEN 50 PLUS CHEW TAB	1	OTC Over the Counter
ONE-A-DAY FOR HER VITACRAVES CHEW TAB	1	OTC Over the Counter
ONE-A-DAY FOR HIM VITACRAVES CHEW TAB	1	OTC Over the Counter
ONE-A-DAY MENS VITACRAVES CHEW TAB	1	OTC Over the Counter
ONE-A-DAY VITACRAVES CHEW TAB	1	OTC Over the Counter
ONE-A-DAY VITACRAVES ADULT CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONE-A-DAY VITACRAVES IMMUNITY CHEW TAB	1	OTC Over the Counter
ONE-A-DAY VITACRAVES SOUR CHEW TAB	1	OTC Over the Counter
ONE-A-DAY WEIGHT SMART ADVANCE TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS 50 PLUS TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS 50+ ADVANTAGE TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS HEALTHY SKIN TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS MIND & BODY TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS PETITES TAB	1	OTC Over the Counter
ONE-A-DAY WOMENS VITACRAVES CHEW TAB	1	OTC Over the Counter
OPTIFAST POST BARIATRIC CHEW TAB	1	OTC Over the Counter
OPTIMUM AIRVITES CHEW TAB	1	OTC Over the Counter
OPTISOURCE POST BARIATRIC SURG CHEW TAB	1	OTC Over the Counter
OPTIVITE P.M.T. TAB	1	OTC Over the Counter
OPURITY BYPASS OPTIMIZED CHEW TAB	1	OTC Over the Counter
PRESERVISION AREDS 2 CHEW TAB	1	OTC Over the Counter
REQ 49+ TAB	1	
STROVITE ONE TAB	1	
SUPPORT LIQUID	1	
SYSTANE ICAPS AREDS2 CHEW TAB	1	OTC Over the Counter
v-c forte cap	1	
VITACHEW ADULT MULTI VITAMIN CHEW TAB	1	OTC Over the Counter
VITAJOY MULTI GUMMIES ADULT CHEW TAB	1	OTC Over the Counter
vitatrum chew tab	1	OTC Over the Counter
WAL-BORN VITAMIN C CHEW TAB	1	OTC Over the Counter
WOMENS MULTI GUMMIES CHEW TAB	1	OTC Over the Counter
WOMENS MULTIVITAMIN + COLLAGEN CHEW TAB	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
YOUR LIFE MULTI ADULT GUMMIES CHEW TAB	1	OTC Over the Counter
YOUR LIFE TEEN MULTI GUMMIES CHEW TAB	1	OTC Over the Counter
YUMVS MULTI ZERO CHEW TAB	1	OTC Over the Counter
YUMVS ZERO DIABETIC MULTIVITAM CHEW TAB	1	OTC Over the Counter
anti-oxidant tab	1	OTC Over the Counter
daily multiple vitamins tab	1	OTC Over the Counter
daily value multivitamin tab	1	OTC Over the Counter
daily vitamin tab	1	OTC Over the Counter
daily vitamins tab	1	OTC Over the Counter
daily vite tab	1	OTC Over the Counter
daily vites tab	1	OTC Over the Counter
daily-vitamin tab	1	OTC Over the Counter
daily-vite tab	1	OTC Over the Counter
daily-vite multivitamin tab	1	OTC Over the Counter
gnp essential one daily tab	1	OTC Over the Counter
healthy hair/skin/nails tab	1	OTC Over the Counter
multi vitamin tab	1	OTC Over the Counter
multi vitamin daily tab	1	OTC Over the Counter
multi-day tab	1	OTC Over the Counter
multi-vitamin tab	1	OTC Over the Counter
multi-vitamin daily tab	1	OTC Over the Counter
multi-vitamins tab	1	OTC Over the Counter
multiple vitamin-folic acid tab	1	OTC Over the Counter
multiple vitamins tab	1	OTC Over the Counter
multiple vitamins essential tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
multivitamin adult tab	1	OTC Over the Counter
multivitamin iron-free tab	1	OTC Over the Counter
once daily tab	1	OTC Over the Counter
one daily tab	1	OTC Over the Counter
one daily essential tab	1	OTC Over the Counter
one daily multivitamin adult tab	1	OTC Over the Counter
one-daily multi vitamins tab	1	OTC Over the Counter
one-daily multi-vitamin tab	1	OTC Over the Counter
qc essentials tab	1	OTC Over the Counter
ra one daily essential tab	1	OTC Over the Counter
sigtab tab	1	OTC Over the Counter
sm multiple vitamins essential tab	1	OTC Over the Counter
stress formula tab	1	OTC Over the Counter
stresstabs energy tab	1	OTC Over the Counter
tab-a-vite tab	1	OTC Over the Counter
tab-a-vite/beta carotene tab	1	OTC Over the Counter
thera tab	1	OTC Over the Counter
thera-mill tab	1	OTC Over the Counter
thera-tabs tab	1	OTC Over the Counter
therems tab	1	OTC Over the Counter
vit e-vit c-beta carotene 200-250-5000 tab	1	OTC Over the Counter
vitalee tab	1	OTC Over the Counter
VITAXYME TAB	1	
PED MULTI VITAMINS W/FL & FE		
ESCAVITE 0.25-7.5 MG CHEW TAB	1	
multi-vit/iron/fluoride 0.25-10 mg/ml solution	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
multi-vitamin/fluoride/iron 0.25-10 mg/ml solution	1	
PED MULTIPLE VITAMINS W/ MINERALS		
ALIVE GUMMIES FOR CHILDREN CHEW TAB	1	OTC Over the Counter
ALIVE MULTI-VITAMIN CHILDRENS CHEW TAB	1	OTC Over the Counter
CHILDRENS GUMMIES CHEW TAB	1	OTC Over the Counter
CVS GUMMY DINOS CHEW TAB	1	OTC Over the Counter
CVS GUMMY MULTIVITAMIN KIDS CHEW TAB	1	OTC Over the Counter
disney cars gummies chew tab	1	OTC Over the Counter
disney princess gummies chew tab	1	OTC Over the Counter
EQ MULTIVITAMIN GUMMIES CHEW TAB	1	OTC Over the Counter
EQ MULTIVITAMINS GUMMY CHILD CHEW TAB	1	OTC Over the Counter
EQL GUMMIES CHILDRENS CHEW TAB	1	OTC Over the Counter
FLINTSTONES GUMMIES BONE BUILD CHEW TAB	1	OTC Over the Counter
GUMMI BEAR MULTIVITAMIN/MIN CHEW TAB	1	OTC Over the Counter
healthy kids overall health chew tab	1	OTC Over the Counter
MULTIVIT-MIN GUMMIES CHILDRENS CHEW TAB	1	OTC Over the Counter
MVW COMPLETE FORMULATION CHEW TAB	1	OTC Over the Counter
MVW COMPLETE FORMULATION D3000 CHEW TAB	1	OTC Over the Counter
MVW COMPLETE FORMULATION D5000 CHEW TAB	1	OTC Over the Counter
sea buddies daily multiple chew tab	1	OTC Over the Counter
SMARTY PANTS KIDS COMPLETE CHEW TAB	1	OTC Over the Counter
spider-man complete multi-vit chew tab	1	OTC Over the Counter
SPONGEBOB SQUAREPANTS GUMMIES CHEW TAB	1	OTC Over the Counter
VITACHEW MULTIPLE VITAMIN CHEW TAB	1	OTC Over the Counter
zoo friends chew tab	1	OTC Over the Counter
zoo friends gummies (w/ min) chew tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zoo friends gummies plus d chew tab	1	OTC Over the Counter
ZOO FRIENDS MULTI GUMMIES CHEW TAB	1	OTC Over the Counter
PED MV W/ FLUORIDE		
multi-vitamin/fluoride 0.25 mg/ml solution	1	
multi-vitamin/fluoride 0.5 mg/ml solution	1	
MULTIVITAMIN/FLUORIDE 0.25 MG CHEW TAB	1	
multivitamin/fluoride 0.25 mg/ml solution	1	OTC Over the Counter
MULTIVITAMIN/FLUORIDE 0.5 MG CHEW TAB	1	
multivitamin/fluoride 0.5 mg/ml solution	1	OTC Over the Counter
MULTIVITAMIN/FLUORIDE 1 MG CHEW TAB	1	
POLY-VI-FLOR 1 MG CHEW TAB	1	
PED VITAMINS ACD W/ FLUORIDE		
tri-vite/fluoride 0.25 mg/ml solution	1	
vitamins acd-fluoride 0.25 mg/ml solution	1	
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA 0.5 MG CHEW TAB	1	
FLORIVA 1 MG CHEW TAB	1	
PRENATAL MV & MIN W/FE-FA		
COMPLETENATE 29-1 MG CHEW TAB	1	
CONCEPT DHA 53.5-38-1 MG CAP	1	
CONCEPT OB 130-92.4-1 MG CAP	1	
CVS PRENATAL 27-0.8 MG TAB	1	OTC Over the Counter
ELITE-OB 50-1.25 MG TAB	1	
ENBRACE HR CAP	1	
FOLIVANE-OB 85-1 MG CAP	1	
M-NATAL PLUS 27-1 MG TAB	1	
MULTI PRENATAL 27-0.8 MG TAB	1	OTC Over the Counter
NEEVO DHA 27-1.13 MG CAP	1	
NEONATAL COMPLETE 27-1 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEONATAL PLUS 27-1 MG TAB	1	
NEONATAL PRENATAL 27-0.8 MG TAB	1	OTC Over the Counter
NEONATAL VITAMIN 27-0.8 MG TAB	1	OTC Over the Counter
NIVA-PLUS 27-1 MG TAB	1	
O-CAL FA 27-1 MG TAB	1	
OB COMPLETE 50-1.25 MG TAB	1	
ONE VITE WOMENS 27-0.8 MG TAB	1	OTC Over the Counter
ONE VITE WOMENS PLUS 27-1 MG TAB	1	
PNV-OMEGA 28-0.6-0.4-340 MG CAP	1	
PRENATABS RX 29-1 MG TAB	1	
PRENATAL 19 CHEW TAB	1	
PRENATAL 19 TAB	1	OTC Over the Counter
PRENATAL 19 29-1 MG CHEW TAB	1	
PRENATAL 19 29-1 MG TAB	1	
PRENATAL 27-0.8 MG TAB	1	OTC Over the Counter
PRENATAL 27-1 MG TAB	1	
PRENATAL LOW IRON 27-0.8 MG TAB	1	OTC Over the Counter
PRENATAL ONE DAILY 27-0.8 MG TAB	1	OTC Over the Counter
PRENATAL PLUS 27-1 MG TAB	1	
PRENATAL PLUS IRON 29-1 MG TAB	1	
PRENATAL PLUS VITAMIN/MINERAL 27-1 MG TAB	1	
PRENATAL VITAMIN 27-0.8 MG TAB	1	OTC Over the Counter
PRENATAL VITAMIN PLUS LOW IRON 27-1 MG TAB	1	
PRENATAL-U 106.5-1 MG CAP	1	
PRENATRIX 27-1 MG TAB	1	
PRENATRYL 27-1 MG TAB	1	
PREPLUS 27-1 MG TAB	1	
RIGHT STEP PRENATAL 27-0.8 MG TAB	1	OTC Over the Counter
SE-NATAL 19 29-1 MG CHEW TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SE-NATAL 19 29-1 MG TAB	1	
TARON-C DHA 35-1 MG CAP	1	
TRICARE TAB	1	
TRINATE TAB	1	
VINATE DHA RF 27-1.13 MG CAP	1	
VINATE II 29-1 MG TAB	1	
VINATE ONE 60-1 MG TAB	1	
VIRT-C DHA 53.5-38-1 MG CAP	1	
VIRT-PN PLUS 28-0.6-0.4-340 MG CAP	1	
VITATHELY WITH GINGER 27-1 MG TAB	1	
VOL-PLUS 27-1 MG TAB	1	
VOL-TAB RX 29-1 MG TAB	1	
WESCAP-C DHA 53.5-38-1 MG CAP	1	
WESTAB PLUS 27-1 MG TAB	1	
ZATEAN-PN PLUS 28-0.6-0.4-340 MG CAP	1	
PRENATAL MV & MIN W/FE-FA-DHA		
FOLET ONE 38-1-225 MG CAP	1	
NESTABS ONE 38-1-225 MG CAP	1	
OBSTETRIX ONE (WITH DOCUSATE) 38-1-225 MG CAP	1	
PNV-DHA 27-0.6-0.4-300 MG CAP	1	
PRENATE DHA 18-0.6-0.4-300 MG CAP	1	
PRENATE ESSENTIAL 18-0.6-0.4-300 MG CAP	1	
TARON-PREX 30-1.2-265 MG CAP	1	
VIRT-PN DHA 27-0.6-0.4-300 MG CAP	1	
ZATEAN-PN DHA 27-0.6-0.4-300 MG CAP	1	
PRENATAL MV & MINERALS W/FA WITHOUT IRON		
PRENATAL GUMMIES/DHA & FA 0.4-32.5 MG CHEW TAB	1	OTC Over the Counter
PRENATE 0.6-0.4 MG CHEW TAB	1	
PRENATAL VITAMINS		
PREMESISRX 1 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENATE AM 1 MG TAB	1	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
baclofen 10 mg tab	1	QL 120 / 30 day(s)
baclofen 20 mg tab	1	QL 120 / 30 day(s)
chlorzoxazone 500 mg tab	1	QL 180 / 30 day(s)
cyclobenzaprine hcl 10 mg tab	1	
cyclobenzaprine hcl 5 mg tab	1	
methocarbamol 500 mg tab	1	
methocarbamol 750 mg tab	1	QL 120 / 30 day(s)
orphenadrine citrate er 100 mg tab er 12h	1	QL 60 / 30 day(s)
tizanidine hcl 2 mg tab	1	QL 3 / day
tizanidine hcl 4 mg tab	1	QL 6 / day
DIRECT MUSCLE RELAXANTS		
dantrolene sodium 100 mg cap	1	
dantrolene sodium 25 mg cap	1	
dantrolene sodium 50 mg cap	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTICHOLINERGICS		
ipratropium bromide 0.03 % solution	1	QL 60 / 30 day(s)
ipratropium bromide 0.06 % solution	1	QL 45 / 30 day(s)
NASAL ANTIHISTAMINES		
azelastine hcl 0.1 % solution	1	QL 60 / 30 day(s)
azelastine hcl 137 mcg/spray solution	1	QL 60 / 30 day(s)
olopatadine hcl 0.6 % solution	1	QL 30.5 / 30 day(s)
NASAL STEROIDS		
allergy relief 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
allergy spray 24 hour 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
allergy spray 24 hour 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
clarispray 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
cvs fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
cvs nasal allergy spray 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
eq allergy relief 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
eq nasal allergy 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
eql fluticasone childrens 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
eql fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
flunisolide 25 mcg/act (0.025%) solution	1	QL 75 / 30 day(s)
fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old
fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ft allergy relief 24 hr 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
gnp 24 hour nasal allergy 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
gnp fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
gnp fluticasone propionate chl 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
goodsense 24-hr allergy nasal 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
goodsense nasal allergy spray 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
hm 24 hour nasal allergy 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
hm allergy relief 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
kls aller-cort 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
kls aller-flo 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
mometasone furoate 50 mcg/act suspension	1	QL 34 / 30 day(s)
NASACORT ALLERGY 24HR 55 MCG/ACT AEROSOL	1	QL 16.9 / 30 day(s) OTC Over the Counter
NASACORT ALLERGY 24HR CHILDREN 55 MCG/ACT AEROSOL	1	QL 16.9 / 30 day(s) OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nasal allergy 24 hour 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
qc allergy relief 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
qc fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
ra nasal allergy 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
sm allergy relief 50 mcg/act suspension	1	QL 16 / 30 day(s) AL1 At least 2 yrs old OTC Over the Counter
triamcinolone acetonide 55 mcg/act aerosol	1	QL 16.9 / 30 day(s) OTC Over the Counter
NEUROMUSCULAR AGENTS		
ALS AGENTS - MISCELLANEOUS		
RADICAVA ORS 105 MG/5ML SUSPENSION	3	QL 50 / 28 day(s) PA S Specialty Drug
RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION	3	PA S Specialty Drug QLC 70 / 180 DAYS
BENZATHIAZOLES		
riluzole 50 mg tab	1	QL 60 / 30 day(s) S Specialty Drug
TEGLUTIK 50 MG/10ML SUSPENSION	2	QL 600 / 30 day(s) PA S Specialty Drug
TIGLUTIK 50 MG/10ML SUSPENSION	2	QL 600 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS		
EVRYSDI 0.75 MG/ML RECON SOLN	1	QL 240 / 30 day(s) PA S Specialty Drug
OPHTHALMIC AGENTS		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
SIMBRINZA 1-0.2 % SUSPENSION	2	QL 12 / 30 day(s)
ARTIFICIAL TEAR AND LUBRICANT COMBINATIONS		
altalube 85-15 % ointment	1	OTC Over the Counter
artificial eye 83-15 % ointment	1	OTC Over the Counter
artificial tears 0.1-0.3 % solution	1	OTC Over the Counter
artificial tears 0.1-0.3 % solution	1	OTC Over the Counter
artificial tears 0.2-0.2-1 % solution	1	OTC Over the Counter
artificial tears 0.5-0.6 % solution	1	OTC Over the Counter
artificial tears 1-0.3 % solution	1	OTC Over the Counter
artificial tears 5-6 mg/ml solution	1	OTC Over the Counter
artificial tears 83-15 % ointment	1	OTC Over the Counter
artificial tears pf 0.1-0.3 % solution	1	OTC Over the Counter
clear eyes all seasons 5-6 mg/ml solution	1	OTC Over the Counter
clear eyes natural tears 5-6 mg/ml solution	1	OTC Over the Counter
cvs artificial tears 1-0.3 % solution	1	OTC Over the Counter
cvs dry eye relief 0.2-0.2-1 % solution	1	OTC Over the Counter
cvs dry-eye relief nighttime 42.5-57.3 % ointment	1	OTC Over the Counter
cvs eye lubricant ointment	1	OTC Over the Counter
cvs eye lubricant nighttime 3-94 % ointment	1	OTC Over the Counter
cvs lubricant drops fast act 0.4-0.3 % solution	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs lubricant drops long last 0.4-0.3 % solution	1	OTC Over the Counter
cvs lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
cvs lubricating eye/overnight ointment	1	OTC Over the Counter
cvs natural tears pf 0.1-0.3 % solution	1	OTC Over the Counter
cvs nighttime dry-eye relief ointment	1	OTC Over the Counter
dry eye relief drops 0.2-0.2-1 % solution	1	OTC Over the Counter
eq artificial tears 1-0.3 % solution	1	OTC Over the Counter
eq lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
eq restore pm ointment	1	OTC Over the Counter
eye lubricant ointment	1	OTC Over the Counter
for sty relief 31.9-57.7 % ointment	1	OTC Over the Counter
ft lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
genteal tears 0.1-0.3 % solution	1	OTC Over the Counter
genteal tears night-time ointment	1	OTC Over the Counter
gnp artificial tears 5-6 mg/ml solution	1	OTC Over the Counter
gnp eye drops 0.2-0.2-1 % solution	1	OTC Over the Counter
gnp eye drops long lasting 0.4-0.3 % solution	1	OTC Over the Counter
gnp nighttime relief lub eye ointment	1	OTC Over the Counter
goodsense artificial tears 0.5-0.6 % solution	1	OTC Over the Counter
goodsense ultra lubricant drop 0.4-0.3 % solution	1	OTC Over the Counter
hm dry eye relief 0.2-0.2-1 % solution	1	OTC Over the Counter
hm lubricating tears 0.4-0.3 % solution	1	OTC Over the Counter
hypotears ointment	1	OTC Over the Counter
lubricant eye ointment	1	OTC Over the Counter
lubricant eye drops (pf) 0.1-0.3 % solution	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
lubricant eye fast acting ointment	1	OTC Over the Counter
lubricant eye nighttime ointment	1	OTC Over the Counter
lubricant eye pm ointment	1	OTC Over the Counter
lubricant pm ointment	1	OTC Over the Counter
lubricating eye drops 0.4-0.3 % solution	1	OTC Over the Counter
lubricating tears eye drops 0.1-0.3 % solution	1	OTC Over the Counter
lubrifresh p.m. ointment	1	OTC Over the Counter
murine tears for dry eyes 5-6 mg/ml solution	1	OTC Over the Counter
puralube 85-15 % ointment	1	OTC Over the Counter
px artificial tears 5-6 mg/ml solution	1	OTC Over the Counter
qc artificial tears 5-6 mg/ml solution	1	OTC Over the Counter
ra artificial tears 1-0.3 % solution	1	OTC Over the Counter
ra lubricant eye 0.4-0.3 % solution	1	OTC Over the Counter
ra lubricant eye 1-0.3 % solution	1	OTC Over the Counter
refresh lacri-lube ointment	1	OTC Over the Counter
refresh p.m. ointment	1	OTC Over the Counter
retaine pm ointment	1	OTC Over the Counter
sm dry eye relief 0.2-0.2-1 % solution	1	OTC Over the Counter
sm lubricant eye drops 0.4-0.3 % solution	1	OTC Over the Counter
sm lubricating tears 0.4-0.3 % solution	1	OTC Over the Counter
soothe nighttime ointment	1	OTC Over the Counter
stye 0.5-0.6 % solution	1	OTC Over the Counter
stye 31.9-57.7 % ointment	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
systane nighttime ointment	1	OTC Over the Counter
tears again ointment	1	OTC Over the Counter
tears pure 0.1-0.3 % solution	1	OTC Over the Counter
tgt lubricant eye drops 1-0.3 % solution	1	OTC Over the Counter
tgt lubricant eye nighttime 83-15 % ointment	1	OTC Over the Counter
ultra fresh pm ointment	1	OTC Over the Counter
ultra lubricating eye drops 0.4-0.3 % solution	1	OTC Over the Counter
vista tears 0.4-0.3 % solution	1	OTC Over the Counter
ARTIFICIAL TEARS AND LUBRICANTS		
ARTIFICIAL TEARS 1 % SOLUTION	1	OTC Over the Counter
artificial tears 1 % solution	1	OTC Over the Counter
artificial tears 1.4 % solution	1	OTC Over the Counter
polyvinyl alcohol 1.4 % solution	1	OTC Over the Counter
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL HCL 0.5 % SOLUTION	1	QL 15 / 28 day(s)
betaxolol hcl 0.5 % solution	1	QL 15 / 28 day(s)
LEVOBUNOLOL HCL 0.5 % SOLUTION	1	QL 12 / 30 day(s)
timolol maleate 0.25 % gel f soln	2	QL 8 / 28 day(s)
timolol maleate 0.25 % solution	1	QL 8 / 28 day(s)
timolol maleate 0.5 % (daily) solution	2	QL 10 / 30 day(s)
timolol maleate 0.5 % gel f soln	2	QL 8 / 28 day(s)
timolol maleate 0.5 % solution	1	QL 10 / 30 day(s)
BETA-BLOCKERS - OPHTHALMIC COMBINATIONS		
dorzolamide hcl-timolol mal 22.3-6.8 mg/ml solution	1	QL 10 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 1 % SOLUTION	1	
atropine sulfate 1 % solution	1	
cyclopentolate hcl 0.5 % solution	1	
cyclopentolate hcl 1 % solution	1	
cyclopentolate hcl 2 % solution	1	
MIOTICS - DIRECT ACTING		
pilocarpine hcl 1 % solution	1	QL 15 / Rx
pilocarpine hcl 2 % solution	1	QL 15 / Rx
pilocarpine hcl 4 % solution	1	QL 15 / Rx
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS		
ak-poly-bac 500-10000 unit/gm ointment	1	QL 14 / Rx
bacitracin-polymyxin b 500-10000 unit/gm ointment	1	QL 14 / Rx
neo-polycin 3.5-400-10000 ointment	1	QL 3.5 / 28 day(s)
neomycin-bacitracin zn-polymyx 3.5-400-10000 ointment	1	QL 3.5 / 28 day(s)
neomycin-bacitracin zn-polymyx 5-400-10000 ointment	1	QL 3.5 / 28 day(s)
polycin 500-10000 unit/gm ointment	1	QL 14 / Rx
polymyxin b-trimethoprim 10000-0.1 unit/ml-% solution	1	QL 45 / Rx
OPHTHALMIC ANTIALLERGIC		
azelastine hcl 0.05 % solution	1	QL 8 / 30 day(s)
bepotastine besilate 1.5 % solution	2	QL 10 / 30 day(s)
CROMOLYN SODIUM 4 % SOLUTION	1	QL 10 / Rx
cromolyn sodium 4 % solution	1	QL 10 / Rx
cvs olopatadine hcl 0.1 % solution	1	OTC Over the Counter
cvs olopatadine hcl 0.2 % solution	1	OTC Over the Counter
epinastine hcl 0.05 % solution	2	QL 8 / 28 day(s)
eye allergy itch relief 0.2 % solution	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eye allergy itch/redness rel 0.1 % solution	1	OTC Over the Counter
ft eye allergy itch & redness 0.1 % solution	1	OTC Over the Counter
ft eye allergy itch relief 0.2 % solution	1	OTC Over the Counter
gnp olopatadine hcl 0.1 % solution	1	OTC Over the Counter
gnp olopatadine hcl 0.2 % solution	1	OTC Over the Counter
hm eye allergy itch relief 0.2 % solution	1	OTC Over the Counter
hm eye allergy itch/red relief 0.1 % solution	1	OTC Over the Counter
olopatadine hcl 0.1 % solution	1	OTC Over the Counter
olopatadine hcl 0.2 % solution	1	OTC Over the Counter
PAZEO 0.7 % SOLUTION	1	QL 8 / 28 day(s)
qc olopatadine hcl 0.2 % solution	1	OTC Over the Counter
sm olopatadine hcl 0.2 % solution	1	OTC Over the Counter
OPHTHALMIC ANTIBIOTICS		
BESIVANCE 0.6 % SUSPENSION	2	QL 23 / 30 day(s)
ciprofloxacin hcl 0.3 % solution	1	QL 23 / Rx
erythromycin 5 mg/gm ointment	1	QL 15 / Rx ACA Affordable Care Act
gatifloxacin 0.5 % solution	1	QL 10.8 / 30 day(s)
LEVOFLOXACIN 0.5 % SOLUTION	1	QL 23 / 30 day(s)
levofloxacin 0.5 % solution	1	QL 23 / 30 day(s)
moxifloxacin hcl 0.5 % solution	1	QL 13 / 30 day(s)
ofloxacin 0.3 % solution	1	QL 45 / 30 day(s)
tobramycin 0.3 % solution	1	QL 65 / 30 day(s)
OPHTHALMIC ANTIFUNGAL		
NATACYN 5 % SUSPENSION	2	QL 23 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC ANTIVIRALS		
TRIFLURIDINE 1 % SOLUTION	2	
OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS		
dorzolamide hcl 2 % solution	1	QL 12 / 30 day(s)
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS 0.05 % EMULSION	2	QL 60 / 30 day(s)
OPHTHALMIC LOCAL ANESTHETICS		
proparacaine hcl 0.5 % solution	1	
tetracaine hcl 0.5 % solution	1	
OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
bromfenac sodium (once-daily) 0.09 % solution	1	QL 8 / Rx
diclofenac sodium 0.1 % solution	1	QL 5 / Rx
ketorolac tromethamine 0.4 % solution	1	QL 5 / Rx
ketorolac tromethamine 0.5 % solution	1	QL 15 / Rx
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS		
APRACLONIDINE HCL 0.5 % SOLUTION	1	QL 24 / 30 day(s)
apraclonidine hcl 0.5 % solution	1	QL 24 / 30 day(s)
brimonidine tartrate 0.2 % solution	1	QL 12 / 30 day(s)
OPHTHALMIC STEROID COMBINATIONS		
bacitra-neomycin-polymyxin-hc 1 % ointment	1	QL 4 / Rx
neo-polycin hc 1 % ointment	1	QL 4 / Rx
neomycin-polymyxin-dexameth 3.5-10000-0.1 ointment	1	QL 4 / Rx
neomycin-polymyxin-dexameth 3.5-10000-0.1 suspension	1	QL 5 / Rx
SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION	1	QL 5 / Rx
tobramycin-dexamethasone 0.3-0.1 % suspension	1	QL 5 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC STEROIDS		
ALREX 0.2 % SUSPENSION	2	QL 15 / Rx
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	1	QL 10 / Rx
fluorometholone 0.1 % suspension	1	QL 10 / Rx
LOTEMAX 0.5 % OINTMENT	2	QL 4 / Rx
LOTEMAX SM 0.38 % GEL	2	QL 10 / Rx
loteprednol etabonate 0.5 % gel	1	
loteprednol etabonate 0.5 % suspension	1	QL 21 / Rx
PREDNISOLONE ACETATE 1 % SUSPENSION	1	QL 21 / Rx
PREDNISOLONE ACETATE P-F 1 % SUSPENSION	1	QL 21 / Rx
OPHTHALMIC SULFONAMIDES		
sulfacetamide sodium 10 % solution	1	QL 5 / Rx
PROSTAGLANDINS - OPHTHALMIC		
latanoprost 0.005 % solution	1	QL 7.5 / 25 day(s)
LUMIGAN 0.01 % SOLUTION	2	QL 7.5 / 25 day(s)
travoprost (bak free) 0.004 % solution	1	QL 5 / 25 day(s)
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
acetic acid 2 % solution	1	
OTIC ANTI-INFECTIVES		
ofloxacin 0.3 % solution	1	
OTIC STEROID-ANTI-INFECTIVE COMBINATIONS		
ciprofloxacin-dexamethasone 0.3-0.1 % suspension	2	QL 8 / Rx
neomycin-polymyxin-hc 1 % solution	1	QL 10 / Rx
neomycin-polymyxin-hc 3.5-10000-1 solution	1	QL 10 / Rx
neomycin-polymyxin-hc 3.5-10000-1 suspension	1	QL 10 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OTIC STEROIDS		
flac 0.01 % oil	1	
fluocinolone acetonide 0.01 % oil	1	
hydrocortisone-acetic acid 1-2 % solution	1	
OXYTOCICS		
methergine 0.2 mg tab	2	QL 180 / 30 day(s)
methylergonovine maleate 0.2 mg tab	2	QL 180 / 30 day(s)
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
FLEBOGAMMA DIF 0.5 GM/10ML SOLUTION	1	PA S Specialty Drug
FLEBOGAMMA DIF 20 GM/400ML SOLUTION	1	PA S Specialty Drug
GAMMAGARD 1 GM/10ML SOLUTION	2	PA S Specialty Drug
GAMMAGARD 10 GM/100ML SOLUTION	2	PA S Specialty Drug
GAMMAGARD 2.5 GM/25ML SOLUTION	2	PA S Specialty Drug
GAMMAGARD 20 GM/200ML SOLUTION	2	PA S Specialty Drug
GAMMAGARD 30 GM/300ML SOLUTION	2	PA S Specialty Drug
GAMMAGARD 5 GM/50ML SOLUTION	2	PA S Specialty Drug
GAMMAKED 1 GM/10ML SOLUTION	2	PA S Specialty Drug
GAMMAKED 10 GM/100ML SOLUTION	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMMAKED 20 GM/200ML SOLUTION	2	PA S Specialty Drug
GAMMAKED 5 GM/50ML SOLUTION	2	PA S Specialty Drug
GAMMAPLEX 20 GM/400ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 1 GM/10ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 10 GM/100ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 2.5 GM/25ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 20 GM/200ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 40 GM/400ML SOLUTION	2	PA S Specialty Drug
GAMUNEX-C 5 GM/50ML SOLUTION	2	PA S Specialty Drug
PENICILLINS		
AMINOPENICILLINS		
amoxicillin 125 mg/5ml recon susp	1	
amoxicillin 200 mg/5ml recon susp	1	
amoxicillin 250 mg cap	1	
AMOXICILLIN 250 MG CHEW TAB	1	
amoxicillin 250 mg/5ml recon susp	1	
amoxicillin 400 mg/5ml recon susp	1	
amoxicillin 500 mg cap	1	
amoxicillin 500 mg tab	1	
amoxicillin 875 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NATURAL PENICILLINS		
PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN	1	
penicillin v potassium 250 mg tab	1	
PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN	1	
penicillin v potassium 500 mg tab	1	
PENICILLIN COMBINATIONS		
AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB	1	
amoxicillin-pot clavulanate 200-28.5 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 250-125 mg tab	1	
amoxicillin-pot clavulanate 250-62.5 mg/5ml recon susp	1	
AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB	1	
amoxicillin-pot clavulanate 400-57 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 500-125 mg tab	1	
amoxicillin-pot clavulanate 600-42.9 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 875-125 mg tab	1	
PENICILLINASE-RESISTANT PENICILLINS		
dicloxacillin sodium 250 mg cap	1	
dicloxacillin sodium 500 mg cap	1	
PHARMACEUTICAL ADJUVANTS		
PARENTERAL VEHICLES		
saline bacteriostatic 0.9 % solution	1	
sodium chloride bacteriostatic 0.9 % solution	1	
PROGESTINS		
medroxyprogesterone acetate 10 mg tab	1	
medroxyprogesterone acetate 2.5 mg tab	1	
medroxyprogesterone acetate 5 mg tab	1	
norethindrone acetate 5 mg tab	1	
progesterone 100 mg cap	1	
progesterone 200 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ALCOHOL DETERRENTS		
acamprosate calcium 333 mg tab dr	1	
disulfiram 250 mg tab	1	
DISULFIRAM 500 MG TAB	1	
disulfiram 500 mg tab	1	
CHOLINOMIMETICS - ACHE INHIBITORS		
donepezil hcl 10 mg tab	1	AL1 At least 18 yrs old
donepezil hcl 10 mg tab disp	1	AL1 At least 40 yrs old
donepezil hcl 23 mg tab	2	AL1 At least 40 yrs old
donepezil hcl 5 mg tab	1	AL1 At least 40 yrs old
donepezil hcl 5 mg tab disp	1	AL1 At least 40 yrs old
galantamine hydrobromide 12 mg tab	1	AL1 At least 40 yrs old
galantamine hydrobromide 4 mg tab	1	AL1 At least 40 yrs old
GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION	2	AL1 At least 40 yrs old
galantamine hydrobromide 8 mg tab	1	AL1 At least 18 yrs old
galantamine hydrobromide er 16 mg cap er 24h	1	AL1 At least 40 yrs old
galantamine hydrobromide er 24 mg cap er 24h	1	AL1 At least 40 yrs old
galantamine hydrobromide er 8 mg cap er 24h	1	AL1 At least 40 yrs old
rivastigmine 13.3 mg/24hr patch 24hr	2	AL1 At least 40 yrs old
rivastigmine 4.6 mg/24hr patch 24hr	2	AL1 At least 40 yrs old
rivastigmine 9.5 mg/24hr patch 24hr	2	AL1 At least 40 yrs old
rivastigmine tartrate 1.5 mg cap	1	AL1 At least 40 yrs old
rivastigmine tartrate 3 mg cap	1	AL1 At least 40 yrs old
rivastigmine tartrate 4.5 mg cap	1	AL1 At least 40 yrs old
rivastigmine tartrate 6 mg cap	1	AL1 At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12 MG TAB	2	QL 120 / 30 day(s) PA S Specialty Drug
AUSTEDO 6 MG TAB	2	QL 60 / 30 day(s) PA S Specialty Drug
AUSTEDO 9 MG TAB	2	QL 120 / 30 day(s) PA S Specialty Drug
tetrabenazine 12.5 mg tab	3	QL 240 / 30 day(s) PA S Specialty Drug
tetrabenazine 25 mg tab	3	QL 120 / 30 day(s) PA S Specialty Drug
MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS		
teriflunomide 14 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
teriflunomide 7 mg tab	1	QL 30 / 30 day(s) PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS		
glatiramer acetate 20 mg/ml soln prsyr	1	QL 30 / 30 day(s) PA S Specialty Drug
glatiramer acetate 40 mg/ml soln prsyr	1	QL 12 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES		
MAVENCLAD (10 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 20 / 301 day(s)
MAVENCLAD (4 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 8 / 301 day(s)
MAVENCLAD (5 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 10 / 301 day(s)
MAVENCLAD (6 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 12 / 301 day(s)
MAVENCLAD (7 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 14 / 301 day(s)
MAVENCLAD (8 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 8 / 301 day(s)
MAVENCLAD (9 TABS) 10 MG TAB THPK	3	PA S Specialty Drug QLC 9 / 301 day(s)
MULTIPLE SCLEROSIS AGENTS - INTERFERONS		
AVONEX PEN 30 MCG/0.5ML AUT-IJ KIT	3	QL 4 / 28 day(s) PA S Specialty Drug
AVONEX PREFILLED 30 MCG/0.5ML PREF SY KT	3	QL 4 / 28 day(s) PA S Specialty Drug
BETASERON 0.3 MG KIT	3	QL 14 / 28 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLEGRIDY 125 MCG/0.5ML SOLN PEN	3	QL 1 / 28 day(s) PA S Specialty Drug
PLEGRIDY 125 MCG/0.5ML SOLN PRSYR	3	QL 1 / 28 day(s) PA S Specialty Drug
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PEN	3	PA S Specialty Drug QLC 1 / 180 day(s)
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PRSYR	3	PA S Specialty Drug QLC 1 / 180 day(s)
REBIF 22 MCG/0.5ML SOLN PRSYR	3	QL 6 / 28 day(s) PA S Specialty Drug
REBIF 44 MCG/0.5ML SOLN PRSYR	3	QL 6 / 28 day(s) PA S Specialty Drug
REBIF REBIDOSE 22 MCG/0.5ML SOLN A-INJ	3	QL 6 / 28 day(s) PA S Specialty Drug
REBIF REBIDOSE 44 MCG/0.5ML SOLN A-INJ	3	QL 6 / 28 day(s) PA S Specialty Drug
REBIF REBIDOSE TITRATION PACK 6X8.8 & 6X22 MCG SOLN A-INJ	3	PA S Specialty Drug QLC 4.2 / 180 day(s)
REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR	3	PA S Specialty Drug QLC 4.2 / 180 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES		
KESIMPTA 20 MG/0.4ML SOLN A-INJ	3	QL 0.4 / 28 day(s) PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS		
dimethyl fumarate 120 mg cap dr	1	QL 60 / 30 day(s) PA S Specialty Drug
dimethyl fumarate 240 mg cap dr	1	QL 60 / 30 day(s) PA S Specialty Drug
dimethyl fumarate starter pack 120 & 240 mg cpdr thpk	1	PA S Specialty Drug QLC 60 / 180 day(s)
MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS		
dalfampridine er 10 mg tab er 12h	1	QL 60 / 30 day(s) PA S Specialty Drug
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS		
memantine hcl 10 mg tab	1	QL 60 / 30 day(s) AL1 At least 18 yrs old
memantine hcl 10 mg/5ml solution	1	QL 360 / 30 day(s) AL1 At least 18 yrs old
memantine hcl 2 mg/ml solution	1	QL 360 / 30 day(s) AL1 At least 18 yrs old
memantine hcl 28 x 5 mg & 21 x 10 mg tab	1	AL1 At least 40 yrs old
memantine hcl 5 mg tab	1	QL 90 / 30 day(s) AL1 At least 18 yrs old
memantine hcl er 28 mg cap er 24h	1	AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PSEUDOBULBAR AFFECT AGENT COMBINATIONS		
NUEDEXTA 20-10 MG CAP	2	PA
SMOKING DETERRENTS		
APO-VARENICLINE 0.5 MG TAB	1	QL 60 / 30 day(s) ACA Affordable Care Act
APO-VARENICLINE 1 MG TAB	1	QL 60 / 30 day(s) ACA Affordable Care Act
bupropion hcl er (smoking det) 150 mg tab er 12h	1	QL 60 / 30 day(s) ACA Affordable Care Act
CHANTIX STARTING MONTH PAK 0.5 MG X 11 & 1 MG X 42 TAB THPK	1	ACA Affordable Care Act
cvs nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
cvs nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eq nicotine step 3 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eql nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eql nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
eql nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ft nicotine 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ft nicotine 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ft nicotine mini 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ft nicotine mini 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gnp nicotine 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine mini 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine mini 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
gnp nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
goodsense nicotine 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
goodsense nicotine 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
goodsense nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
goodsense nicotine 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
habitrol 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hm nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
hm nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
kls quit2 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
kls quit2 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
kls quit4 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
kls quit4 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
NICODERM CQ 14 MG/24HR PATCH 24HR	1	ACA Affordable Care Act OTC Over the Counter
NICODERM CQ 7 MG/24HR PATCH 24HR	1	ACA Affordable Care Act OTC Over the Counter
nicorelief 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
NICORETTE 4 MG GUM	1	ACA Affordable Care Act OTC Over the Counter
NICORETTE STARTER KIT 4 MG GUM	1	ACA Affordable Care Act OTC Over the Counter
nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
NICOTINE 21-14-7 MG/24HR KIT	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine mini 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine mini 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine polacrilex mini 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine step 1 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine step 2 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
nicotine step 3 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
NICOTROL 10 MG INHALER	1	QL 480 / 30 day(s) ACA Affordable Care Act
NICOTROL NS 10 MG/ML SOLUTION	1	QL 600 / 30 day(s) ACA Affordable Care Act
px stop smoking aid 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
px stop smoking aid 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
px stop smoking aid 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
px stop smoking aid 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
qc nicotine transdermal system 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
qc nicotine transdermal system 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ra mini nicotine 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra mini nicotine 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine gum 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine gum 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
ra nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
sm nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tgt nicotine 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine polacrilex 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine polacrilex 4 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine step one 21 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine step three 7 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
tgt nicotine step two 14 mg/24hr patch 24hr	1	QL 30 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
thrive 2 mg gum	1	QL 720 / 30 day(s) ACA Affordable Care Act OTC Over the Counter
varenicline tartrate (starter) 0.5 mg x 11 & 1 mg x 42 tab thpk	1	ACA Affordable Care Act
varenicline tartrate 0.5 mg tab	1	QL 60 / 30 day(s) ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
varenicline tartrate 1 mg tab	1	QL 60 / 30 day(s) ACA Affordable Care Act
varenicline tartrate(continue) 1 mg tab	1	ACA Affordable Care Act
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS		
fingolimod hcl 0.5 mg cap	1	QL 30 / 30 day(s) PA S Specialty Drug
MAYZENT 0.25 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
MAYZENT 2 MG TAB	3	QL 30 / 30 day(s) PA S Specialty Drug
MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK	3	PA S Specialty Drug QLC 12 / 180 day(s)
ZEPOSIA 0.92 MG CAP	3	QL 30 / 30 day(s) PA S Specialty Drug
ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK	3	PA S Specialty Drug QLC 7 / 180 day(s)
ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK	3	PA S Specialty Drug QLC 37 / 180 day(s)
ZEPOSIA STARTER KIT 0.23MG &0.46MG 0.92MG(21) CAP THPK	3	PA S Specialty Drug QLC 28/180 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RESPIRATORY AGENTS - MISC.		
CFTR POTENTIATORS		
KALYDECO 13.4 MG PACKET	1	QL 60 / 30 days PA S Specialty Drug
KALYDECO 150 MG TAB	1	QL 60 / 30 day(s) PA S Specialty Drug
KALYDECO 25 MG PACKET	1	QL 60 / 30 day(s) PA S Specialty Drug
KALYDECO 50 MG PACKET	1	QL 60 / 30 day(s) PA S Specialty Drug
KALYDECO 75 MG PACKET	1	QL 60 / 30 day(s) PA S Specialty Drug
CYSTIC FIBROSIS AGENT - COMBINATIONS		
ORKAMBI 100-125 MG PACKET	3	QL 60 / 30 day(s) PA S Specialty Drug
ORKAMBI 100-125 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug
ORKAMBI 150-188 MG PACKET	3	QL 60 / 30 day(s) PA S Specialty Drug
ORKAMBI 200-125 MG TAB	3	QL 120 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORKAMBI 75-94 MG PACKET	3	QL 60 / 30 day(s) PA AL1 At least 1 yrs old S Specialty Drug
SYMDEKO 100-150 & 150 MG TAB THPK	3	QL 60 / 30 day(s) PA S Specialty Drug
SYMDEKO 50-75 & 75 MG TAB THPK	3	QL 60 / 30 day(s) PA S Specialty Drug
TRIKAFTA 100-50-75 & 150 MG TAB THPK	1	QL 90 / 30 day(s) PA S Specialty Drug
TRIKAFTA 100-50-75 & 75 MG THER PACK	1	QL 56 / 28 days PA S Specialty Drug
TRIKAFTA 50-25-37.5 & 75 MG TAB THPK	1	QL 90 / 30 day(s) PA S Specialty Drug
TRIKAFTA 80-40-60 & 59.5 MG THER PACK	1	QL 56 / 28 days PA S Specialty Drug
HYDROLYTIC ENZYMES		
PULMOZYME 2.5 MG/2.5ML SOLUTION	3	QL 150 / 30 day(s) S Specialty Drug
PULMONARY FIBROSIS AGENTS		
pirfenidone 267 mg tab	1	QL 180 / 30 day(s) PA S Specialty Drug
pirfenidone 801 mg tab	1	QL 90 / 30 day(s) PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFONAMIDES		
SULFADIAZINE 500 MG TAB	2	
sulfadiazine 500 mg tab	2	
TETRACYCLINES		
doxycycline hyclate 100 mg cap	1	
doxycycline hyclate 100 mg tab	1	
doxycycline hyclate 20 mg tab	1	
doxycycline hyclate 50 mg cap	1	
doxycycline monohydrate 100 mg cap	1	
doxycycline monohydrate 100 mg tab	1	
doxycycline monohydrate 25 mg/5ml recon susp	1	
doxycycline monohydrate 50 mg cap	1	
lymepak 100 mg tab	1	
minocycline hcl 100 mg cap	1	
minocycline hcl 50 mg cap	1	
minocycline hcl 50 mg tab	1	
minocycline hcl 75 mg cap	1	
mondoxyne nl 100 mg cap	1	
morgidox 100 mg cap	1	
morgidox 50 mg cap	1	
tetracycline hcl 250 mg cap	2	
tetracycline hcl 500 mg cap	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
methimazole 10 mg tab	1	
methimazole 5 mg tab	1	
propylthiouracil 50 mg tab	1	
THYROID HORMONES		
ARMOUR THYROID 180 MG TAB	1	
ARMOUR THYROID 240 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARMOUR THYROID 300 MG TAB	1	
euthyrox 100 mcg tab	1	
euthyrox 112 mcg tab	1	
euthyrox 125 mcg tab	1	
euthyrox 137 mcg tab	1	
euthyrox 150 mcg tab	1	
euthyrox 175 mcg tab	1	
euthyrox 200 mcg tab	1	
euthyrox 25 mcg tab	1	
euthyrox 50 mcg tab	1	
euthyrox 75 mcg tab	1	
euthyrox 88 mcg tab	1	
levo-t 100 mcg tab	1	
levo-t 112 mcg tab	1	
levo-t 125 mcg tab	1	
levo-t 137 mcg tab	1	
levo-t 150 mcg tab	1	
levo-t 175 mcg tab	1	
levo-t 200 mcg tab	1	
levo-t 25 mcg tab	1	
levo-t 300 mcg tab	1	
levo-t 50 mcg tab	1	
levo-t 75 mcg tab	1	
levo-t 88 mcg tab	1	
levothyroxine sodium 100 mcg tab	1	
levothyroxine sodium 112 mcg tab	1	
levothyroxine sodium 125 mcg tab	1	
levothyroxine sodium 137 mcg tab	1	
levothyroxine sodium 150 mcg tab	1	
levothyroxine sodium 175 mcg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium 200 mcg tab	1	
levothyroxine sodium 25 mcg tab	1	
levothyroxine sodium 300 mcg tab	1	
levothyroxine sodium 50 mcg tab	1	
levothyroxine sodium 75 mcg tab	1	
levothyroxine sodium 88 mcg tab	1	
levoxyl 100 mcg tab	1	
levoxyl 112 mcg tab	1	
levoxyl 125 mcg tab	1	
levoxyl 137 mcg tab	1	
levoxyl 150 mcg tab	1	
levoxyl 175 mcg tab	1	
levoxyl 200 mcg tab	1	
levoxyl 25 mcg tab	1	
levoxyl 50 mcg tab	1	
levoxyl 75 mcg tab	1	
levoxyl 88 mcg tab	1	
liothyronine sodium 25 mcg tab	1	
liothyronine sodium 5 mcg tab	1	
liothyronine sodium 50 mcg tab	1	
NP THYROID 120 MG TAB	1	
NP THYROID 15 MG TAB	1	
NP THYROID 30 MG TAB	1	
NP THYROID 60 MG TAB	1	
NP THYROID 90 MG TAB	1	
thyroid 120 mg tab	1	
thyroid 15 mg tab	1	
thyroid 30 mg tab	1	
thyroid 60 mg tab	1	
thyroid 90 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
unithroid 100 mcg tab	1	
unithroid 112 mcg tab	1	
unithroid 125 mcg tab	1	
unithroid 137 mcg tab	1	
unithroid 150 mcg tab	1	
unithroid 175 mcg tab	1	
unithroid 200 mcg tab	1	
unithroid 25 mcg tab	1	
unithroid 300 mcg tab	1	
unithroid 50 mcg tab	1	
unithroid 75 mcg tab	1	
unithroid 88 mcg tab	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION	1	ACA Affordable Care Act
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	1	ACA Affordable Care Act
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION	1	ACA Affordable Care Act
DAPTACEL 23-15-5 SUSPENSION	1	ACA Affordable Care Act
DIPHTHERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION	1	ACA Affordable Care Act
INFANRIX 25-58-10 SUSPENSION	1	ACA Affordable Care Act
KINRIX SUSPENSION	1	ACA Affordable Care Act
KINRIX 0.5 ML SUSP PRSYR	1	ACA Affordable Care Act
PEDIARIX SUSP PRSYR	1	ACA Affordable Care Act
PENTACEL RECON SUSP	1	ACA Affordable Care Act
QUADRACEL SUSPENSION	1	ACA Affordable Care Act
QUADRACEL 0.5 ML SUSP PRSYR	1	ACA Affordable Care Act
TDVAX 2-2 LF/0.5ML SUSPENSION	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TENIVAC 5-2 LFU INJECTABLE	1	ACA Affordable Care Act
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
dicyclomine hcl 10 mg cap	1	
dicyclomine hcl 10 mg/5ml solution	1	
dicyclomine hcl 20 mg tab	1	
H-2 ANTAGONISTS		
acid control maximum strength 150 mg tab	1	OTC Over the Counter
acid control maximum strength 20 mg tab	1	OTC Over the Counter
acid controller max st 20 mg tab	1	OTC Over the Counter
acid reducer 150 mg tab	1	OTC Over the Counter
acid reducer maximum strength 150 mg tab	1	OTC Over the Counter
acid reducer maximum strength 20 mg tab	1	OTC Over the Counter
cimetidine 200 mg tab	1	
cimetidine 300 mg tab	1	
cimetidine 400 mg tab	1	
cimetidine 800 mg tab	1	
CIMETIDINE HCL 300 MG/5ML SOLUTION	1	
cimetidine hcl 300 mg/5ml solution	1	
cimetidine hcl 400 mg/6.67ml solution	1	
cvs acid controller max st 20 mg tab	1	OTC Over the Counter
eq acid reducer 150 mg tab	1	OTC Over the Counter
eq famotidine max st 20 mg tab	1	OTC Over the Counter
eql acid reducer 150 mg tab	1	OTC Over the Counter
eql heartburn prevention 20 mg tab	1	OTC Over the Counter
famotidine 20 mg tab	1	OTC Over the Counter
famotidine 40 mg tab	1	
famotidine 40 mg/5ml recon susp	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
famotidine maximum strength 20 mg tab	1	OTC Over the Counter
ft acid reducer max strength 20 mg tab	1	OTC Over the Counter
gnp acid reducer max st 20 mg tab	1	OTC Over the Counter
goodsense acid reducer 150 mg tab	1	OTC Over the Counter
heartburn relief max st 150 mg tab	1	OTC Over the Counter
heartburn relief max st 20 mg tab	1	OTC Over the Counter
hm acid reducer 150 mg tab	1	OTC Over the Counter
hm famotidine 20 mg tab	1	OTC Over the Counter
kls acid controller max st 20 mg tab	1	OTC Over the Counter
kls acid reducer max st 150 mg tab	1	OTC Over the Counter
mm acid-pep maximum strength 20 mg tab	1	OTC Over the Counter
mm famotidine 20 mg tab	1	OTC Over the Counter
nizatidine 150 mg cap	1	
nizatidine 300 mg cap	1	
px acid reducer max st 150 mg tab	1	OTC Over the Counter
px acid reducer max st 20 mg tab	1	OTC Over the Counter
qc acid controller max st 20 mg tab	1	OTC Over the Counter
qc famotidine acid reducer 20 mg tab	1	OTC Over the Counter
ra acid reducer max st 150 mg tab	1	OTC Over the Counter
ra acid reducer max st 20 mg tab	1	OTC Over the Counter
ranitidine hcl 150 mg tab	1	OTC Over the Counter
sb acid controller max st 20 mg tab	1	OTC Over the Counter
sb acid reducer 150 mg tab	1	OTC Over the Counter
sm acid reducer max st 150 mg tab	1	OTC Over the Counter
sm acid reducer max st 20 mg tab	1	OTC Over the Counter
wal-zan 150 maximum strength 150 mg tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zantac 360 20 mg tab	1	OTC Over the Counter
zantac 360 max st 20 mg tab	1	OTC Over the Counter
MISC. ANTI-ULCER		
sucralfate 1 gm tab	1	
sucralfate 1 gm/10ml suspension	1	
PROTON PUMP INHIBITORS		
cvs esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
cvs omeprazole 20 mg tab dr	1	OTC Over the Counter
eq esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
eq omeprazole 20 mg tab dr	1	OTC Over the Counter
eql omeprazole 20 mg tab dr	1	OTC Over the Counter
esomeprazole magnesium 10 mg packet	1	QL 60 / 30 day(s)
esomeprazole magnesium 20 mg cap dr	1	QL 60 / 30 day(s) OTC Over the Counter
esomeprazole magnesium 20 mg packet	1	QL 60 / 30 day(s)
esomeprazole magnesium 40 mg cap dr	1	QL 60 / 30 day(s)
esomeprazole magnesium 40 mg packet	1	QL 60 / 30 day(s)
FIRST-LANSOPRAZOLE 3 MG/ML SUSPENSION	1	AL1 Up to 12 yrs old
FIRST-OMEPRAZOLE 2 MG/ML SUSPENSION	1	QL 60 / 30 day(s) AL1 Up to 12 yrs old
ft omeprazole 20 mg tab dr	1	OTC Over the Counter
gnp esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
gnp omeprazole 20 mg tab dr	1	OTC Over the Counter
goodsense esomeprazole 20 mg cap dr	1	OTC Over the Counter
hm esomeprazole magnesium dr 20 mg cap dr	1	OTC Over the Counter
hm omeprazole 20 mg tab dr	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
kls esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
kls omeprazole 20 mg tab dr	1	OTC Over the Counter
lansoprazole 15 mg cap dr	1	QL 60 / 30 day(s)
lansoprazole 30 mg cap dr	1	QL 60 / 30 day(s)
NEXIUM 24HR 20 MG CAP DR	1	OTC Over the Counter
NEXIUM 24HR 20 MG TAB DR	1	OTC Over the Counter
NEXIUM 24HR CLEAR MINIS 20 MG CAP DR	1	OTC Over the Counter
omeprazole 10 mg cap dr	1	QL 60 / 30 day(s)
omeprazole 20 mg cap dr	1	QL 60 / 30 day(s)
omeprazole 20 mg tab dr	1	OTC Over the Counter
omeprazole 40 mg cap dr	1	QL 60 / 30 day(s)
pantoprazole sodium 20 mg tab dr	1	QL 30 / 30 day(s)
pantoprazole sodium 40 mg packet	1	QL 30 / 30 day(s)
pantoprazole sodium 40 mg tab dr	1	QL 30 / 30 day(s)
PREVACID 24HR 15 MG CAP DR	1	OTC Over the Counter
px omeprazole 20 mg tab dr	1	OTC Over the Counter
qc esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
qc omeprazole 20 mg tab dr	1	OTC Over the Counter
ra esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
ra omeprazole 20 mg tab dr	1	OTC Over the Counter
rabeprazole sodium 20 mg tab dr	1	QL 60 / 30 day(s)
sb omeprazole 20 mg tab dr	1	OTC Over the Counter
sm esomeprazole magnesium 20 mg cap dr	1	OTC Over the Counter
sm omeprazole 20 mg tab dr	1	OTC Over the Counter
tgt omeprazole 20 mg tab dr	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUATERNARY ANTICHOLINERGICS		
glycopyrrolate 1 mg tab	1	
glycopyrrolate 1 mg/5ml solution	1	
glycopyrrolate 2 mg tab	1	
ULCER DRUGS - PROSTAGLANDINS		
misoprostol 100 mcg tab	1	F Covered under fertility rider
misoprostol 200 mcg tab	1	F Covered under fertility rider
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)		
OXYBUTYNIN CHLORIDE 2.5 MG TAB	1	QL 90 / 30 day(s)
oxybutynin chloride 5 mg tab	1	QL 120 / 30 day(s)
oxybutynin chloride 5 mg/5ml solution	1	QL 600 / 30 day(s)
oxybutynin chloride er 10 mg tab er 24h	1	QL 60 / 30 day(s)
oxybutynin chloride er 15 mg tab er 24h	1	QL 60 / 30 day(s)
oxybutynin chloride er 5 mg tab er 24h	1	QL 60 / 30 day(s)
solifenacin succinate 10 mg tab	1	QL 30 / 30 day(s)
solifenacin succinate 5 mg tab	1	QL 30 / 30 day(s)
tolterodine tartrate 1 mg tab	1	QL 60 / 30 day(s)
tolterodine tartrate 2 mg tab	1	QL 60 / 30 day(s)
tolterodine tartrate er 2 mg cap er 24h	1	QL 30 / 30 day(s)
tolterodine tartrate er 4 mg cap er 24h	1	QL 30 / 30 day(s)
trospium chloride 20 mg tab	1	QL 60 / 30 day(s)
trospium chloride er 60 mg cap er 24h	1	QL 30 / 30 day(s)
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ 25 MG TAB ER 24H	2	QL 30 / 30 day(s)
MYRBETRIQ 50 MG TAB ER 24H	2	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MYRBETRIQ 8 MG/ML SRER	2	QL 300 / 28 day(s)
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
bethanechol chloride 10 mg tab	1	
bethanechol chloride 25 mg tab	1	
bethanechol chloride 5 mg tab	1	
bethanechol chloride 50 mg tab	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB RECON SOLN	1	ACA Affordable Care Act
BEXSERO SUSP PRSYR	1	ACA Affordable Care Act
HIBERIX 10 MCG RECON SOLN	1	ACA Affordable Care Act
MENACTRA SOLUTION	1	ACA Affordable Care Act
MENQUADFI SOLUTION	1	ACA Affordable Care Act
MENVEO RECON SOLN	1	ACA Affordable Care Act
MENVEO SOLUTION	1	ACA Affordable Care Act
PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION	1	ACA Affordable Care Act
PENBRAYA RECON SUSP	1	ACA Affordable Care Act
PNEUMOVAX 23 25 MCG/0.5ML INJECTABLE	1	ACA Affordable Care Act
PREVNAR 13 SUSPENSION	1	ACA Affordable Care Act
PREVNAR 20 0.5 ML SUSP PRSYR	1	ACA Affordable Care Act
TRUMENBA SUSP PRSYR	1	ACA Affordable Care Act
VAXNEUVANCE 0.5 ML SUSP PRSYR	1	ACA Affordable Care Act
VIRAL VACCINE COMBINATIONS		
M-M-R II RECON SOLN	1	ACA Affordable Care Act
PROQUAD RECON SUSP	1	ACA Affordable Care Act
TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIRAL VACCINES		
ABRYSVO 120 MCG/0.5ML RECON SOLN	1	AL1 At least 60 yrs old ACA Affordable Care Act
AFLURIA QUADRIVALENT SUSPENSION	1	ACA Affordable Care Act
AFLURIA QUADRIVALENT 0.25 ML SUSP PRSYR	1	AL1 Up to 3 yrs old ACA Affordable Care Act
AFLURIA QUADRIVALENT 0.5 ML SUSP PRSYR	1	AL1 At least 3 yrs old ACA Affordable Care Act
AREXVY 120 MCG/0.5ML RECON SUSP	1	AL1 At least 60 yrs old ACA Affordable Care Act
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	1	AL1 At least 12 yrs old ACA Affordable Care Act
COMIRNATY 30 MCG/0.3ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
ENGERIX-B 10 MCG/0.5ML SUSP PRSYR	1	ACA Affordable Care Act
ENGERIX-B 20 MCG/ML SUSP PRSYR	1	ACA Affordable Care Act
ENGERIX-B 20 MCG/ML SUSPENSION	1	ACA Affordable Care Act
FLUAD 0.5 ML SUSP PRSYR	1	AL1 At least 65 yrs old ACA Affordable Care Act
FLUAD QUADRIVALENT 0.5 ML PRSYR	1	AL1 At least 65 yrs old ACA Affordable Care Act
FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR	1	AL1 At least 1 yrs old ACA Affordable Care Act
FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR	1	AL1 At least 18 yrs old ACA Affordable Care Act
FLUCELVAX QUADRIVALENT SUSPENSION	1	AL1 At least 4 yrs old ACA Affordable Care Act
FLUCELVAX QUADRIVALENT 0.5 ML SUSP PRSYR	1	AL1 At least 4 yrs old ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLULAVAL QUADRIVALENT SUSPENSION	1	AL1 At least 1 yrs old ACA Affordable Care Act
FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR	1	AL1 At least 1 yrs old ACA Affordable Care Act
FLUMIST QUADRIVALENT SUSPENSION	1	AL1 2 to 49 yrs old ACA Affordable Care Act
FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR	1	AL1 At least 65 yrs old ACA Affordable Care Act
FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR	1	AL1 At least 65 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT SUSPENSION	1	AL1 At least 3 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT 0.5 ML SUSP PRSYR	1	ACA Affordable Care Act
FLUZONE QUADRIVALENT 0.5 ML SUSPENSION	1	AL1 At least 3 yrs old ACA Affordable Care Act
GARDASIL 9 SUSP PRSYR	1	ACA Affordable Care Act
GARDASIL 9 SUSPENSION	1	ACA Affordable Care Act
HAVRIX 1440 EL U/ML SUSPENSION	1	ACA Affordable Care Act
HAVRIX 720 EL U/0.5ML SUSPENSION	1	ACA Affordable Care Act
HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR	1	ACA Affordable Care Act
IPOL INJECTABLE	1	ACA Affordable Care Act
JANSSEN COVID-19 VACCINE 0.5 ML SUSPENSION	1	AL1 At least 18 yrs old
MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION	1	AL1 0 to 5 yrs old ACA Affordable Care Act
MODERNA COVID-19 BIVAL BOOSTER 50 MCG/0.5ML SUSPENSION	1	AL1 At least 6 yrs old ACA Affordable Care Act
MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION	1	AL1 At least 6 yrs old ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MODERNA COVID-19 VAC (BOOSTER) 50 MCG/0.5ML SUSPENSION	1	AL1 At least 6 yrs old ACA Affordable Care Act
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSPENSION	1	AL1 0.5 to 11 yrs old ACA Affordable Care Act
MODERNA COVID-19 VACC 6-11Y 50 MCG/0.5ML SUSPENSION	1	AL1 6 to 11 yrs old ACA Affordable Care Act
MODERNA COVID-19 VACC 6M-5Y 25 MCG/0.25ML SUSPENSION	1	AL1 Up to 5 yrs old ACA Affordable Care Act
MODERNA COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION	1	AL1 0 to 4 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION	1	AL1 5 to 11 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.2ML SUSPENSION	1	AL1 5 to 11 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	1	AL1 5 to 11 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.2ML SUSPENSION	1	AL1 Up to 4 yrs old ACA Affordable Care Act
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	1	AL1 0.5 to 4 yrs old ACA Affordable Care Act
PFIZER-BIONT COVID-19 VAC-TRIS 30 MCG/0.3ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
PFIZER-BIONTECH COVID-19 VACC 30 MCG/0.3ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREHEVBRIO 10 MCG/ML SUSPENSION	1	AL1 At least 18 yrs old ACA Affordable Care Act
RABAVERT RECON SUSP	2	
RECOMBIVAX HB 10 MCG/ML SUSP PRSYR	1	ACA Affordable Care Act
RECOMBIVAX HB 10 MCG/ML SUSPENSION	1	ACA Affordable Care Act
RECOMBIVAX HB 40 MCG/ML SUSPENSION	1	ACA Affordable Care Act
RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR	1	ACA Affordable Care Act
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION	1	ACA Affordable Care Act
ROTARIX RECON SUSP	1	ACA Affordable Care Act
ROTARIX SUSPENSION	1	ACA Affordable Care Act
ROTATEQ SOLUTION	1	ACA Affordable Care Act
SHINGRIX 50 MCG/0.5ML RECON SUSP	1	ACA Affordable Care Act
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	1	AL1 At least 12 yrs old ACA Affordable Care Act
SPIKEVAX 50 MCG/0.5ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
SPIKEVAX COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	1	AL1 At least 12 yrs old ACA Affordable Care Act
VAQTA 25 UNIT/0.5ML SUSPENSION	1	ACA Affordable Care Act
VAQTA 50 UNIT/ML SUSPENSION	1	ACA Affordable Care Act
VARIVAX 1350 PFU/0.5ML INJECTABLE	1	ACA Affordable Care Act
ZOSTAVAX 19400 UNT/0.65ML RECON SUSP	1	AL1 At least 50 yrs old ACA Affordable Care Act
VAGINAL AND RELATED PRODUCTS		
IMIDAZOLE-RELATED ANTIFUNGALS		
cvs miconazole 7 2 % cream	1	OTC Over the Counter
eq miconazole 7 day treatment 2 % cream	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eql miconazole 7 2 % cream	1	OTC Over the Counter
ft miconazole 7 2 % cream	1	OTC Over the Counter
gnp miconazole 7 2 % cream	1	OTC Over the Counter
GYNE-LOTRIMIN 1 % CREAM	1	OTC Over the Counter
miconazole 7 2 % cream	1	OTC Over the Counter
miconazole nitrate 2 % cream	1	OTC Over the Counter
qc miconazole 7 2 % cream	1	OTC Over the Counter
ra miconazole 7 2 % cream	1	OTC Over the Counter
sm miconazole 7 2 % cream	1	OTC Over the Counter
terconazole 0.4 % cream	1	QL 45 / Rx
terconazole 0.8 % cream	1	QL 20 / Rx
tgt miconazole 7 2 % cream	1	OTC Over the Counter
SPERMICIDES		
ENCARE 100 MG SUPPOS	1	ACA Affordable Care Act OTC Over the Counter
OPTIONS GYNOL II CONTRACEPTIVE 3 % GEL	1	ACA Affordable Care Act OTC Over the Counter
SHUR-SEAL CONTRACEPTIVE 2 % GEL	1	ACA Affordable Care Act OTC Over the Counter
TODAY SPONGE 1000 MG MISC	1	ACA Affordable Care Act OTC Over the Counter
VCF VAGINAL CONTRACEPTIVE 12.5 % FOAM	1	ACA Affordable Care Act OTC Over the Counter
VCF VAGINAL CONTRACEPTIVE 28 % FILM	1	ACA Affordable Care Act OTC Over the Counter
VCF VAGINAL CONTRACEPTIVE 4 % GEL	1	ACA Affordable Care Act OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VAGINAL ANTI-INFECTIVES		
clindamycin phosphate 2 % cream	1	
metronidazole 0.75 % gel	1	
VANDAZOLE 0.75 % GEL	1	
VAGINAL CORTICOSTEROIDS		
cortizone-10 feminine itch 1 % cream	1	QL 454 / 30 day(s) OTC Over the Counter
VAGINAL ESTROGENS		
estradiol 0.1 mg/gm cream	1	QL 120 / 30 day(s)
ESTRING 2 MG RING	2	QL 1 / 90 day(s)
ESTRING 7.5 MCG/24HR RING	2	QL 1 / 90 day(s)
PREMARIN 0.625 MG/GM CREAM	2	QL 60 / 30 day(s)
VAGIFEM 10 MCG TAB	1	QL 30 / 30 day(s)
VAGINAL PROGESTINS		
ENDOMETRIN 100 MG INSERT	2	QL 84 / 28 day(s) PA F Covered under fertility rider
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
AUVI-Q 0.1 MG/0.1ML SOLN A-INJ	2	QLC 4 / 30 day(s)
AUVI-Q 0.15 MG/0.15ML SOLN A-INJ	2	QLC 4 / 30 day(s)
AUVI-Q 0.3 MG/0.3ML SOLN A-INJ	2	QLC 4 / 30 day(s)
epinephrine 0.15 mg/0.3ml soln a-inj	1	QLC 4 / 30 day(s)
epinephrine 0.3 mg/0.3ml soln a-inj	1	QLC 4 / 30 day(s)
EPINEPHRINE PF 1 MG/ML SOLUTION	1	
midodrine hcl 10 mg tab	1	
midodrine hcl 2.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
midodrine hcl 5 mg tab	1	
VITAMINS		
VITAMIN D		
cvs d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
cvs d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
d 1000 25 mcg (1000 ut) cap	1	OTC Over the Counter
d-1000 25 mcg (1000 ut) tab	1	OTC Over the Counter
d-1000 extra strength 25 mcg (1000 ut) tab	1	OTC Over the Counter
d2000 ultra strength 50 mcg (2000 ut) cap	1	OTC Over the Counter
d3 2000 50 mcg (2000 ut) cap	1	OTC Over the Counter
d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
d3 high potency 25 mcg (1000 ut) cap	1	OTC Over the Counter
d3 high potency 25 mcg cap	1	OTC Over the Counter
d3 high potency 50 mcg (2000 ut) cap	1	OTC Over the Counter
d3 super strength 50 mcg (2000 ut) cap	1	OTC Over the Counter
d3-1000 25 mcg (1000 ut) cap	1	OTC Over the Counter
d3-1000 25 mcg (1000 ut) tab	1	OTC Over the Counter
eql vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
eql vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
ergocalciferol 1.25 mg (50000 ut) cap	1	
finest nutrition vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
ft vitamin d3 25 mcg cap	1	OTC Over the Counter
ft vitamin d3 50 mcg cap	1	OTC Over the Counter
gnp d 1000 25 mcg (1000 ut) cap	1	OTC Over the Counter
gnp vitamin d 25 mcg (1000 ut) tab	1	OTC Over the Counter
gnp vitamin d3 extra strength 25 mcg (1000 ut) tab	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hm vitamin d3 25 mcg (1000 ut) tab	1	OTC Over the Counter
hm vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
kls d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
kp vitamin d 25 mcg (1000 ut) cap	1	OTC Over the Counter
kp vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
kp vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
nat-rul vitamin d 25 mcg (1000 ut) tab	1	OTC Over the Counter
pronutrients vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
qc vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
qc vitamin d3 25 mcg (1000 ut) tab	1	OTC Over the Counter
qc vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
ra vitamin d-3 25 mcg (1000 ut) tab	1	OTC Over the Counter
ra vitamin d-3 50 mcg (2000 ut) cap	1	OTC Over the Counter
sm vitamin d3 25 mcg (1000 ut) tab	1	OTC Over the Counter
sm vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
sm vitamin d3 50 mcg cap	1	OTC Over the Counter
true vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
true vitamin d3 25 mcg (1000 ut) tab	1	OTC Over the Counter
vitamin d (cholecalciferol) 25 mcg (1000 ut) cap	1	OTC Over the Counter
vitamin d (cholecalciferol) 25 mcg (1000 ut) tab	1	OTC Over the Counter
vitamin d (cholecalciferol) 50 mcg (2000 ut) cap	1	OTC Over the Counter
vitamin d (ergocalciferol) 1.25 mg (50000 ut) cap	1	
vitamin d (ergocalciferol) 50000 unit cap	1	
vitamin d 25 mcg (1000 ut) tab	1	OTC Over the Counter
vitamin d 50 mcg (2000 ut) cap	1	OTC Over the Counter
vitamin d high potency 25 mcg (1000 ut) cap	1	OTC Over the Counter

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vitamin d-1000 max st 25 mcg (1000 ut) tab	1	OTC Over the Counter
vitamin d-3 25 mcg (1000 ut) cap	1	OTC Over the Counter
vitamin d3 1000 unit cap	1	OTC Over the Counter
vitamin d3 25 mcg (1000 ut) cap	1	OTC Over the Counter
vitamin d3 25 mcg (1000 ut) tab	1	OTC Over the Counter
vitamin d3 25 mcg tab	1	OTC Over the Counter
vitamin d3 50 mcg (2000 ut) cap	1	OTC Over the Counter
vitamin d3 50 mcg cap	1	OTC Over the Counter
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phytonadione 5 mg tab	2	

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